

CHEMIST & DRUGGIST

The newsweekly for pharmacy

a Benn publication

January 15 1983

PSGB & PSNC
approve draft
Clothier
regulations

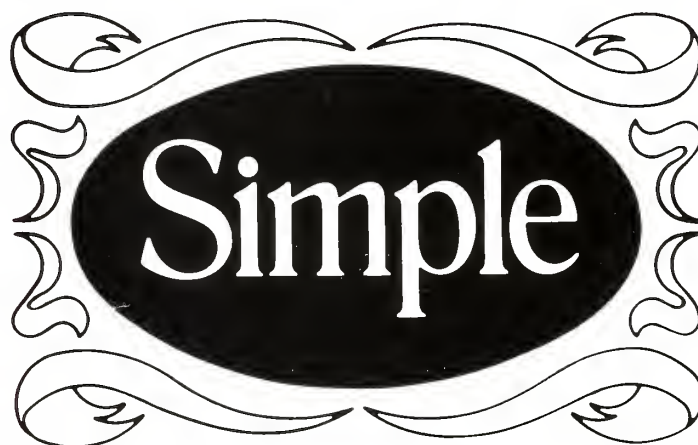
NI chemists'
consortium
in Sanger's
depot bid?

Hoechst UK
negotiate to
sell Optrex

Panorama says
warning signs
from Opren
side effects
overlooked

Opticians and
competition:
OFT report

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prosperous New Year!



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national TV promotion

NEW

women's magazine colour campaign

NEW

all-year-round national press advertising

NEW

exciting line extensions

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SterlingHealth



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*Independent Research Survey

CHEMIST & DRUGGIST

Incorporating Retail Chemist

January 15, 1983

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CONTENTS

Pharmacy approval for Clothier draft

PSGB and PSNC give go-ahead 44

Bid for Sanger's NI wholesale depots

...from consortium of contractors 45

Panorama on Opren

'Marketing misleading and side
effects overlooked' 46

Opticians' profits

...not excessive says OFT 82

Optrex for sale?

Hoechst negotiate with buyers 84

Comment 43

People; deaths 49

Topical reflections by Xrayser 49

Prescription specialities 50

Counterpoints 50

Photographic 64

Pharmacy winners 68

Pharmacy economics 70

New technology 74

PSGB Statutory Committee 78

Letters 81

News extra 82

Business news 84

Appointments 85

Coming events 86

Market news 87

Classified advertisements 88

COMMENT

Tell the public

The "Panorama" attack on the makers of Opren revealed an interesting side issue — Dista had in fact been taken to task for their advertising by the Association of the British Pharmaceutical Industry's code of practice committee. An ABPI spokesman confirmed to *C&D* this week that the company had been found "at fault" and had taken correcting action. However, neither the proceedings of the committee, nor its decisions, are made public.

And that is a pity. It is very much in the industry's own interest that it should be self-policing as far as possible. But there can be no confidence that a laudable code of conduct is being observed, or enforced, if transgressions are hushed up. In the parallel areas controlled by the

Advertising Standards Authority, details of cases considered are made public on a regular basis — this both demonstrates the Authority's effectiveness and serves as a disincentive to those who might otherwise "sail close to the wind". The disciplinary committee proceedings of the various professions could similarly be cited.

The code committee's impartial activity is not in doubt — it is chaired by a QC and has two BMA-nominated members — but when issues of such public concern as Opren are dealt with, and deemed not to warrant publication (as is allowed for in the committee's rules) then the public has a right to question the protection afforded by the voluntary procedure. The media may sensationalise any disclosures, of course — but perhaps companies would then be doubly careful about promotional activities.

Tell pharmacists

So the great Clothier regulations debate is at an end — or is it? Both the Pharmaceutical Society's Council and the Pharmaceutical Services Negotiating Committee have approved the drafts and presumably the last remaining doubts have been overcome to their satisfaction. But will the outcome also satisfy the "grass roots" (for once an almost relevant term!) as well as the politicians? And what of the ginger group Rural Pharmacists Association?

Despite a direct link with Council, the RPA is still urging its members to press their MPs to sign an early day motion concerning the option forms — a cause taken up by Xrayser this week (p49). With no hint of the "swings and roundabouts" of the final draft, however, rural pharmacists have no means of knowing whether their political pressuring is necessary, whether it will potentially bring them an additional benefit — or whether they are actually jeopardising an agreement that, taken as a whole, they would support.

No-one is prepared to forecast the

timetable for the regulations progress through Parliament, but once laid, they can be "prayed against" — if six or more MPs take this course of action, prompted by their pharmaceutical constituents, then a debate and a vote are always on the cards.

There is often much to be said for conducting negotiations in total secrecy, and that has often applied in the case of rural dispensing, but there should also be progress reports to ensure that the direction taken is supported by those affected — and equally to discourage individuals from rocking the boat. The sooner the Society and PSNC issue that progress report, the safer the regulations as a whole will be.

Pharmacy approval for Clothier draft

At their January meetings the Council of the Pharmaceutical Society of Great Britain and the Pharmaceutical Services Negotiating Committee agreed the latest draft of the NHS (General Medical and Pharmaceutical Services), Amendment Regulations (The Clothier Regulations). This joint statement from the PSGB and PSNC concludes: "A letter is being sent to the DHSS informing them of the decision."

At last month's meeting of Council it was revealed discussions on the draft were

incomplete and that further discussions with the General Medical Services Council and the DHSS were necessary (*C&D*, December 4 and 18/25, 1982, p1008 and p1076 respectively). Mr Stephen Axon, PSNC secretary, told *C&D* that negotiations on Clothier between the professions were now at an end after five years. The draft regulations will now be presented to the Minister for Health for his approval before being laid before Parliament, probably at the end of March or beginning of April.

More information on medicines wanted

About a third of the general public would like much more information about the medicines they take, according to a recent survey conducted by the Office of Health Economics. Of the remainder, roughly half were satisfied with their current knowledge of side effects and the way in which drugs work.

Some 80 per cent of respondents in the survey said they were "generally confident" about medicine safety, while 10 per cent were definitely not confident. In the OHE's 1964 survey, 89 per cent of the public reported themselves generally confident, despite the thalidomide tragedy of only two years before. Then only 4 per cent were positively not confident.

Only a very small minority of the public were found to have any detailed knowledge of the regulations and procedures governing the safety of drugs, however, suggesting to the OHE that many people "may simply be complacent, not rationally secure".

The pharmaceutical industry should respond to these findings by means of continued distribution of objective information to the Press and the various consumer bodies involved. "Industry leaders who are not prepared to enter into dialogue with such bodies have little right to claim that consumer group views are needlessly biased or ill-informed" the OHE conclude.

In the field of drug safety, it is argued that industry measures should be taken to break down the barriers between drug manufacturers and their ultimate clients. This would aim to provide medicine users with sources of information alternative to those offered by the established professions of medicine and pharmacy on

the one hand, and the media on the other.

The OHE feels consumer movements to have an important role in promoting the efficient working of the market. While recognising health care as a special case requiring adequate professional guidance and authority, they nonetheless advocate increased consumer participation in health care decision-making whenever possible.

Considering ways in which this may be done, the OHE suggests the use of patient package inserts supplied with medicines as being potentially useful. American research suggests that such inserts are quite frequently read, and that they do improve drug knowledge. The danger is, however, that those who read and value the information will tend to belong to that section of the population most comfortable with alternative published information sources. "Desirably or otherwise, older, sicker and less-educated people probably want to be able to put their trust in their doctors and avoid being confronted with too many difficult choices related to their treatments" it is concluded. *The Consumer Movement, Health and the Pharmaceutical Industry* (£2), Office of Health Economics, 12 Whitehall, London SW1A 2DY.

Pharmacy numbers

The number of pharmacies increased for the second year running in 1982. There were 10,830 premises on the Register at the end of December, compared with 10,711 at the end of 1981 and 10,263 at the end of 1980. This reinforces opinion that the twenty-five year decline in pharmacy numbers is now halted.

In December, 25 premises joined the Register, and nine were deleted. In England 22 shops opened up (four in London) and four closed down. There were no changes in Wales,

while in Scotland three shops opened and five closed.

Superintendent role — a legal opinion

A new legal opinion on the role of the superintendent pharmacist emerged in the recent High Court appeal against a Statutory Committee decision to reprimand two pharmacists and a company in an "advertising" case (*C&D* last week, p5).

According to the transcript now available, Mr Justice Woolf said in his judgment: "It is true that certain duties of the superintendent pharmacist cannot be delegated. However, when you bear in mind that a company as large as Boots only has one superintendent pharmacist, it cannot be the intention that superintendents should not use other pharmacists to perform certain of their functions".

In relation to the specific case, the judge went on: "In particular, it is difficult to see how Mr Berg (the superintendent) could be held guilty of the necessary misconduct in leaving the correction of the first proof to Mr Brandon (pharmacist in charge of the shop), when it had been laid down by him that the advertisement was not to appear until he had approved of it and he was entitled to expect that that was what would happen.

"He was presumably entitled to go on holiday and could not be blamed for what happened while he was away, as long as he had arranged that no advertisement was to appear which he had not approved."

Action of starch-blockers questioned

People who buy starch-blocker preparations in the belief that they can eat starch but not absorb it, are misguided, according to workers from the Nutrition Research Group in Middlesex.

In a letter to *The Lancet* the group claims there is no direct evidence that preparations of starch blockers inhibit starch digestion and absorption in man. Furthermore it cannot be assumed that inhibition of pancreatic amylase would affect starch digestion, since digestive enzymes are usually present in amounts far above those required for digestion of luminal contents.

The group cites results from a study comparing two starch-blocker preparations with placebo, which show that neither starch-blocker tablet delayed the digestion or further metabolism of the starch to any measurable extent.

NI consortium of pharmacists in Sanger's bid

A consortium comprising over 200 NI pharmacist contractors led by the chairman of their Pharmaceutical Contractors Committee, Mr John White, is making a bid for Sanger's wholesale business in the Province. Sangers confirm discussions are under way for the Thomas McMullen depots at Omagh, co Tyrone and Belfast.

Mr White told *C&D* that 230 contractors had come forward to date — around half of those in Province — with offers of financial support for the venture the aim of which is —

“... to take over Sangers or start up a wholesale business of our own.” NI contractors are apparently disenchanted with discounting and the cash and carry situation.

Sangers chief executive, Mike Flinn said that while the company is not actively seeking to dispose of the NI business, any potential offer would be considered. “So far the consortium has not made a firm bid or made clear what its structure will be.” *C&D* understands talks between the two parties are going ahead.

Ostomy payment system to change

The DHSS wishes to change the arrangements for pricing colostomy and urine drainage equipment to reflect the prices in manufacturers' or wholesalers' lists. At present invoices are attached to prescriptions for such products when they are sent for pricing by the pharmacist.

The Pharmaceutical Services Negotiating Committee is seeking safeguards over broken bulk and out-of-pocket expenses and an assurance that these prices will be freely available from the manufacturer or wholesaler.

□ The leaflet “You and Your Chemist”, first published last Summer by the Pharmaceutical Services Negotiating Committee, is again available to Local Pharmaceutical Committees.

Following comments on the original leaflet from LPCs and Community Health Councils, the text has been revised. It contains information on the role of community pharmacy within the NHS, a summary of the regulations on exemption, instructions on the safety of medicines and references to the pharmacist's advisory role.

The leaflet has been produced in the form of artwork suitable for inexpensive printing at local “instant print” shops. In the case of LPCs, the PSNC office will run off copies at cost on request. Inquiries to Mr P. Boardman, PSNC, 59 Buckingham Street, Aylesbury HP20 2PJ (telephone Aylesbury (0296) 32823).

Chemist & Druggist 15 January 1983



“It's a raid — they don't believe so many pharmacists go sailing for fun”

Heroin seizures by customs a record

Heroin seizures made by Customs during 1982 showed an increase of 102 per cent by weight over the same period in 1981. The total of 176.34 kg seized is the highest ever recorded in the UK and has an estimated street value of £28,121,267.

The majority of the heroin was seized at Heathrow Airport — the Indian sub-continent, and particularly Pakistan, has been the major source, accounting for 84 per cent of the drugs.

The amount of cannabis seized last year was less than in previous years, as was the amount of cocaine, even though worldwide traffic is increasing steadily.

H M Customs & Excise
drug seizures 1982

| | | | Estimated street value 1982 | % |
|-------------|---------|------------|-----------------------------|---------|
| Cannabis | herbal | 12,374.3kg | £13,301,355 | -25.4% |
| | resin | 3,602kg | £7,205,198 | -52.2 |
| Heroin | liquid | 27.0kg | £161,838 | -63.3 |
| | | 176.3kg | £28,121,267 | +102.3 |
| Cocaine | | 12.0kg | £1,083,369 | -11.5 |
| Morphine | powder | 2.1kg | £164,550 | -62.8 |
| LSD | doses | 14.2 | £28,394 | +1378.8 |
| Amphetamine | tablets | 826 | £2,065 | |
| | powder | 2.1kg | £42,480 | -74.3 |
| Opium | tablets | 485 | £243 | -57.5 |
| | | 16.2kg | £81,075 | +63.5 |
| | | | £50,191,834 | |

Brushing dentures best for cleaning

The debate concerning the two ways of cleaning dentures, brushing and soaking, is examined in the latest *Which?* report — and brushing comes out top.

Following tests on 200 sets of dentures for effective plaque and stains removal, *Which?* (published by the Consumer's Association) found that brush-on pastes were best. Dentu-creme and Steradent Fresh worked out as the cheapest, both at 1p per ml. But a good result can also be reached by using any of the soaking-type cleaners, provided that the dentures are brushed after soaking. Soap and water is effective at removing plaque, but a specialist cleaner must be used occasionally to remove stains, *Which?* recommends. Whichever way dentures are cleaned there is always a build-up of calculus which can only be removed at a dental laboratory.

The report emphasises that pack instructions must be followed, especially when the product contains dilute acid or bleach.

Use of fixatives

Denture fixatives should only be used in certain circumstances — dentures should fit snugly so fixatives are not needed, the *Which?* dental experts advise. Some fixatives contain karaya gum which makes

natural teeth decay and so people with partial dentures are advised to use a synthetic fixative. Another potential problem with fixatives, the experts say, is that if they are not regularly removed by cleaning they may trap food and start to smell.

35pc of antibiotic scripts 'unnecessary'

Thirty-five per cent of prescriptions for antibiotics at a Bristol hospital in 1980 were judged to be unnecessary.

This analysis followed an audit carried out on a variety of wards at Southmead Hospital, reported in the *British Medical Journal* last week. The figure compares with 28 per cent of prescriptions for antibiotics judged unnecessary, in a similar audit the previous year.

Inappropriate choice

Inappropriate choice of antibiotic was made in 17 per cent (1979) and 16 per cent (1980) of prescriptions. The paper comments that an educational programme about antibiotic prescribing carried out between the audits had no beneficial effect and it advocates a widespread and continual educational programme. Most of the prescriptions were written by junior staff who move frequently and often do not have the guidance of their seniors it says.

Opren — 'marketing misleading and side effects overlooked'

Eli Lilly & Co Ltd used deceptive and misleading claims while marketing Opren; they obscured side effects of the drug by withholding information, and the company and the Government did not act quickly enough when deaths occurred. All those allegations were made on BBC1's "Panorama" programme on Monday this week.

Opren was the subject of the first of a two-part programme, which looked at the events leading up to the withdrawal of the drug and the missed warning signs which, it was claimed, could possibly have saved lives.

No company comment

Both Eli Lilly & Co Ltd and Dista Products Ltd were asked to participate in the programme but declined. Eli Lilly have issued a statement saying that: "The company feels that it would be inappropriate to comment on the first part of a two-part Panorama programme. However, we would like to restate that it is the policy of Eli Lilly & Co worldwide to comply fully with all requirements of the law and applicable regulations".

Dr Sidney Wolfe, of American Health Research Group, said that doctors would not have prescribed the drug but for patients' demand. The public had read about the drug in the Press. The promotional literature contained references to results for rats and only implied that the drug was effective in human subjects.

Dr William O'Brien of the University of Virginia said that after analysing "correctly" results from papers cited by the company, he found there were errors and benoxaprofen had no effect on erosion progression or X-ray progression for arthritic patients.

The Federal Drug Administration sent — Eli Lilly a regulatory letter instructing

them to stop publishing the unfounded claims in the advertisements for Opren. In Britain, the ABPI regulations had also been breached by the company, however Dista only received a "secret slap on the wrists" for this transgression. The DHSS received no complaints at all, the programme said.

Pharmakokinetics

Dr R. Hamdey, consultant geriatrician at St John's Hospital, Battersea, London, told "Panorama" reporter, Tom Mangold, that he had carried out pharmacokinetics studies of benoxaprofen in the elderly and said that on average the drug's half-life was five times that in younger patients. He had recommended that the drug be given in reduced dosage, perhaps once or twice a week — almost one year before doctors were warned that the drug should be given in lower dose to elderly patients (*C&D* May 29, 1982). Mr Hamdey said Eli Lilly claimed it would be commercially non-viable.

Dr H. Taggart, of Belfast City Hospital, reported that five patients had died after taking benoxaprofen. He said he could not confirm his suspicion until after the third death, since he did not have permission to perform a post mortem on the first two patients.

When asked how many lives could have been saved had he known of Dr Hamdey's work, Dr Taggart said: "Three of the five patients would not have received Opren and may be alive today".

Mutual respect

Professor Abraham Goldberg was asked whether the Committee on Safety of Medicines could cope with a company which decided to be dishonest. Professor Goldberg explained that the CSM and the pharmaceutical companies acted with mutual respect and that it would not be in the companies' interests to act dishonestly.

Part 2 of the Panorama programme will be shown on BBC1 on January 17.

be eliminated. This alone will decrease the bulk of applications by 70 per cent or more, from an average of 100,000 pages to less than 30,000, say the FDA. An appeals procedure that companies can use to resolve disputes with FDA reviewers within 60 days is to replace the present system, which has no time limit.

Increased surveillance

Policy regarding acceptance of foreign data is to be modified if the proposals are accepted, so that approval of a drug may be based solely on foreign clinical studies that meet US testing criteria. A strengthening of adverse reaction surveillance is also proposed, along with elimination and revision of other reporting requirements placed on companies after the drug has been approved.

Upjohn hit back over Halcion

Suggestions that Halcion may cause suicidal tendencies and lead to depression have been strongly refuted by manufacturers Upjohn. Patients interviewed on BBC1 "Newsnight" programme last week also claimed they felt better after stopping taking the drug.

"We have followed up a number of these accusations and they have not been associated with Halcion," managing director Mr Geoffrey Rodgers told *C&D*. "All the evidence is anecdotal. We have asked for information, and neither we nor the Committee on Safety of Medicines have received any. While it is not desirable for the company to have this kind of publicity, it is the best form of surveillance."

The product was approved by the Federal Drug Administration in the US only last month, he added, and at a higher dose than that recommended in the UK.

The Newsnight story was filmed last Summer. Originally the controversy over Halcion started in the Netherlands, where after critical exposure in the media the drug was suspended for six months in August 1979. Early in 1980 Dutch officials said Upjohn could resume sales, provided that only the lower 0.25mg dose was marketed, and a list of side effects added to the package insert. The company refused and Halcion has not been reinstated.

Slipped disc drug

An injectable drug to be used as an alternative to surgery in the treatment of some back problems, such as slipped discs, has received approval from the Federal Drug Administration in the US.

The drug, chymopapain (marketed by Smith Laboratories Inc as Chymodiactin) is for use in treating herniated lower back discs, which measures such as bed rest and traction, have failed to cure.

Chymopapain causes the dissolution of the herniated material, thus relieving pressure on the surrounding nerves. The drug is derived from an extract of the papaya plant. The most serious risk associated with the drug is anaphylaxis, which occurs in approximately 1 per cent of patients.

■ The benefits of family planning are explained in the five ethnic languages of Urdu, Punjabi, Gujarathi, Bengali and Cantonese in a booklet available from Wyeth's family planning division. The booklet also describes the main methods of contraception and includes a patient advice leaflet on Trinordiol. Copies from Mrs A. Rose, Customer Services Department, Wyeth Laboratories, Huntercombe Lane South, Taplow, Maidenhead, Berks.

FDA propose cut in drug review time

The Federal Drug Administration in the US has formally announced proposals to reduce the time it takes to review new drugs. Currently FDA review takes about two years after an application is submitted. The proposed changes should reduce the time by about six months, officials predict.

The proposals include a streamlined format for applications. A summary of the entire application will accompany the separate detailed sections for review. A procedure will be introduced to allow companies to update their application while it is undergoing examination.

Copies of routine case reports on each patient on whom the drug was tested will

Ruthmol

**They'll
take it
instead
of a
pinch
of salt**

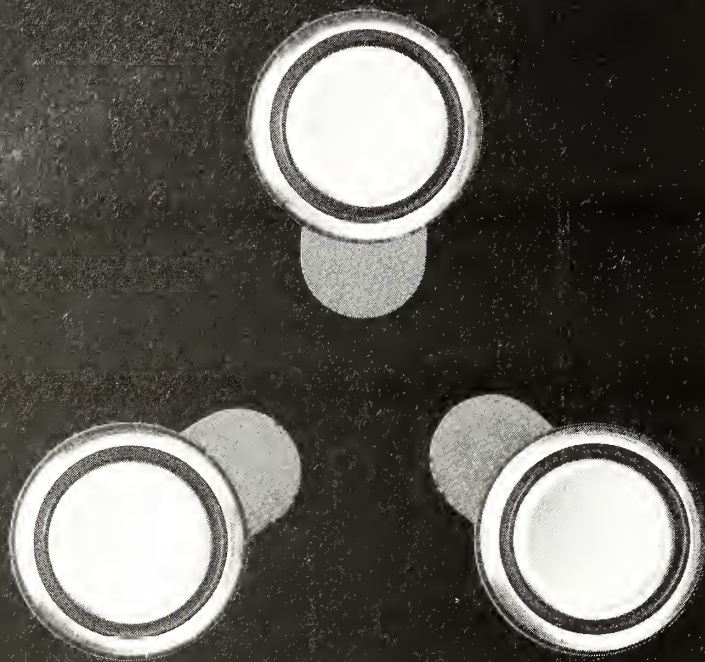
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These Zinc Air batteries are a welcome sight for the hard-of-hearing.

Independent tests (IEC 86-24009) have proved that they last twice as long as Mercury RM675H batteries. So the inconvenience of changing batteries is halved. Zinc Air perform better, too, because their power remains constant far longer than mercury batteries.

And now they're available in this distinctive red dial pack dispenser with 3 Zinc Air batteries, giving the same life as 6 mercury batteries, and the convenience of a pack your customer really wants.

Only Ever Ready make a full range of both Zinc Air and mercury hearing aid batteries. See your van sales rep. or wholesaler for details.

Ever Ready Zinc Air. You'll be glad you heard of them.



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POWER TO YOUR SALES**

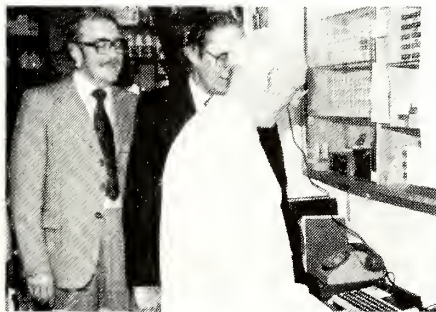


NI pharmacist gets OBE

The chairman of the NI Pharmaceutical Contractors' Committee, Mr R. J. White, has received the OBE for services to local government. John White runs a pharmacy in Coleraine, co Londonderry, has been a member of the local council since 1967, and was mayor for three years from May, 1977.

Mr White told *C&D* he was mayor at the time of the Queen's Jubilee and presided at a dinner attended by the Queen and Duke of Edinburgh held at the New University of Ulster (August 12, 1977). "The profession of pharmacy must take some credit for my OBE," says Mr White, "Running a community pharmacy you are always in the public eye, which helps when council elections come around."

His family has run the Coleraine business, White's Medical Hall, since 1925, but Mr White regrets that none of his three sons are likely to enter the profession. His wife Dorothy, is a linguist, as is their eldest son, Alistair (23) who works for a German firm with some pharmaceutical connections, Dr Madaus, Jeremy (21) is training to be a dentist and Andrew (17) is taking "A" levels at present.



Mr R. A. Williams, 82, of the Washington Pharmacy, Penarth, is probably the oldest Link user in the country, say Vestric. He qualified nearly 60 years ago and has been at the Washington Pharmacy since 1946. He is watched operating his system by Mr D. Badger and Mr Trevor Russell from Vestric's Cardiff depot

Deaths

Leach: On December 20, 1982, Gilbert Francis Leach, MPS, in Glan Clwyd Hospital, Bodolwyddan, North Wales. Mr Leach studied at Liverpool School of Pharmacy and registered in 1947. He managed shops in North Wales and then Upton-by-Chester Co-operative Pharmacy (later National Co-operative Chemists Ltd) from 1950 until his retirement in 1980.

Right away

If you have a minute, write a short note to your MP referring to the early day motion put forward by Clement Freud, November 27, 1982, saying that in our free society, when a country doctor suggests a patient should sign a form requesting that the doctor supply medicines as well as medical advice, the degree of choice would appear to be about nil.

To refuse, the patient would have to say he was rejecting an additional convenient service being offered by the practitioner of his choice — because he didn't want it! Whatever the patient said, it would seem to be offering an affront to a man whose goodwill most would rather retain.

The fact that there is an overwhelming financial incentive for the doctor to want to establish a dispensary is hardly going to be disclosed to the patient, who will not be told either than the existing wide-ranging pharmaceutical services in the area, available all day, could well disappear in consequence. Surely it is reasonable for the patient who requires a doctor to provide medicines to write to the FPC (whose address the doctor might provide) to make his request? I have no doubt the action would be encouraged... but the proposal that doctors should hold the option forms transforms an action which would normally arise from genuine need into passive response to a request from the most prestigious man in the local community.

In such circumstances, how could a patient — almost certainly unwell — be expected to make a balanced decision? What should be a matter of choice would become virtually a matter of coercion, albeit wrapped in a parcel which makes it appear to be a gift.

New Year

Like me, you will by now have shaken off the fag of festivities and be gladly back in harness for a quiet life? Maybe, but as I write this I'm still wondering what sort of a year I have ahead. So far, at any rate, I have seen a heartening increase in business: some truly awful weather seemed to encourage people to shop locally.

But it's a different kind of business now from the one I knew 15-20 years ago, when in all truth pharmacy was booming, with a chemist on every parade as an accepted and viable part of the suburban scene, with Christmas time a blaze of lights and decorations, the windows

packed to the top with coffrets, and the dispensing bench swamped with work. Today I count the formal gift sets on the fingers of my hands, and although the spread of goods is now wider than ever before, my retail turnover is just below half the value of my dispensing — a complete reversal from when I started.

But I find greater satisfaction than ever before. The most rewarding thing I ever did was to recognise the need for a change in my approach to dispensing, accepting that if I was to remain a useful and valued servant to my customers I had to involve myself directly with them. Our role is different and better.

I have trained technicians to count and label, because I think my brains can be better used in supervising dispensing, and making sure the patients really understand how they are to use what they are being given, rather than in counting one to a hundred, thousands of times (not quite!) a year.

But even this raises problems. In checking, are we to re-count what our assistants have packed? Since I am anonymous I can admit to discovering in one of my trainees an occasional mental aberration which meant when she dispensed 100 phenobarb 30mgm, she counted only 30. In a dark bottle, completely covered by the label, it was only after a customer (who said she had been short-counted before) tipped the bottle out on the counter and said "How many do you see?" that I discovered it. And I've done it myself, though to the best of my knowledge I have picked it up before it went out. Human error. I suppose you have to learn to live with it and accept the responsibility. In reprimanding a pharmacist who short-counted some Laxis recently, the FPC did what it had to. For the pharmacist, and his company, I have some sympathy.

Insulated

My diabetic patients are responding well in giving information for the forms to be forwarded to our local clinic, and seem to think we are being very forward-looking and helpful in taking such an interest in their welfare — an unexpected PR spin-off benefit if ever there was one. Good to see it, and a little surprising to find such an intelligent interest from everyone, including one or two from whom I expected great resistance. The publicity appears to have been supremely effective in making my diabetics want to become "humanly insulated" — as one of them put it!

PRESCRIPTION SPECIALITIES

Dual role for new benzodiazepines

Xanax, launched by Upjohn last week, is a benzodiazepine derivative licensed for the treatment of anxiety, and anxiety associated with depression. In general practice anxiety and depressive symptoms often occur together, and severe underlying depression may be masked by anxiety symptoms. Most benzodiazepines have no effect on the symptoms of depression — in some cases they uncover them with a resultant deterioration in the patient's condition.

Xanax (alprazolam) is a triazolo benzodiazepine. Early screening suggested it would have anxiolytic properties, and a study in California with 976 patients indicated alprazolam-treated patients showed a slight advantage over diazepam-treated patients throughout a four-week study — the difference reached statistical significance at the end of the fourth week.

Alprazolam patients continued to improve throughout the four weeks of study, while diazepam patients showed little improvement after the end of the second week. Drowsiness appeared less frequently in the alprazolam group, and more diazepam patients dropped out due to side effects.

Marcaïn for spinal analgesia

A new indication — intradural analgesia — has been approved for Marcaïn Plain, 0.5 per cent. A dosage of 2-4ml (10-20mg) is recommended for procedures using the lumbar block. Marcaïn behaves as an isobaric solution of bupivacaine in cerebrospinal fluid, surgical analgesia usually being achieved within seven to 14 minutes. *Duncan Flockhart & Co Ltd, 700 Oldfield Lane North, Greenford.*

Durex combination

LRC have introduced a Durex diaphragm / Duragel dual pack (rsp £8.42). The diaphragm comes in nine different sizes with a 100g tube of Duragel. *LRC Products Ltd, North Circular Road, London.*

Alupent inhalant

The Alupent inhalant solution pack size has been changed from 7.5ml to 10ml (£0.90 trade). The new packs will be issued when supplies of the 7.5ml packs are exhausted. *Boehringer Ingelheim Ltd, Southern Industrial Estate, Bracknell.*

Alprazolam was also evaluated in the treatment of neurotic or endogenous depression, in a 723-patient study in which it was compared with imipramine. Alprazolam was found to be superior to imipramine at weeks one and two: by week four imipramine had achieved efficacy equal to that of alprazolam. This suggests, say Upjohn, that alprazolam has antidepressant activity equal to that of a standard drug, but with a more rapid onset of action.

After oral administration, peak plasma levels occur in one to two hours, and plasma half life is 12-15 hours.

Research has provided evidence that benzodiazepines enhance pre- and post-synaptic inhibition of GABA in the central nervous system. GABAergic inhibitory inputs have been established in dopaminergic and 5-HT cells, and increased inhibition of these neuronal systems may underlie the anti-anxiety and sedative actions of benzodiazepines.

The antidepressant properties of alprazolam may be related to the triazole ring moiety. Trazodone, a phenylpiperazine with a triazole ring, has been found to be as effective as tricyclic antidepressants in treating depression. It has been shown to inhibit uptake of 5-HT, although it has no effect on monoamine oxidase.

Tobralex eye drops

Manufacturer Alcon Laboratories (UK) Ltd, Imperial Way, Watford, Herts
Description A sterile, colourless to very pale yellow ophthalmic solution containing tobramycin 0.3 per cent w/v preserved with 0.01 per cent benzalkonium chloride.

Indications Treatment of external bacterial conditions of the eye and its appendages.

Dosage Adults and children: in mild to moderate cases instil one or two drops into the affected eye every four hours. For severe infections instil two drops into the eye hourly until there is improvement and then reduce treatment prior to discontinuation.

Contraindications warnings etc. Sensitivity to tobramycin or gentamicin; if so discontinue therapy. Prolonged use may result in over-growth of non-susceptible organisms, including fungi. If super-infection occurs appropriate therapy should be initiated.

Pharmaceutical precautions Store at 8°C to 25°C. Do not freeze. Discard contents one month after opening.

Packs 5ml dispensers (£1.50 trade)

Supply restrictions Prescription only
Issued January 1983

Osmosin in 'blisters'

Osmosin will be supplied in blister packs of 30 tablets replacing existing bottles of 30. *Merck Sharp & Dohme Ltd, Hertford Road, Hoddesdon, Herts.*

COUNTERPOINTS

Focus cosmetics for lens wearers

A new range of cosmetics for contact lens wearers is being introduced by Focus Contact Lens Laboratory.

The ingredients of the make-up and cleansing lotions are processed into fine particles so that the risk of infection and irritation is minimised, the makers claim. The range includes an eye liner, an item which cannot normally be worn with contact lenses.

Focus also hopes to attract women who wear spectacles but whose eyes are sensitive to cosmetics.

The range includes eye make-up remover lotion (£4.15), emulsion (£4.18), creme eye shadows in five shades (£4.73), eye liner (£4.58), and mascara (£4.66). A counter display unit is available containing six each of the eye make-up remover and emulsion, four of each shade of eye shadow, eye liner and mascara. (£163.88) There is a 15 per cent discount

on stock and display cases for a trial period. Literature for both the professional and the user from *Focus Contact Lens Laboratory Ltd, Northbridge Road, Berkhamstead, Herts HP4 1EH.*

Sachet drink for huge energy users

Valesto are launching Supafit, an energising, electrolyte replacement drink in sachets.

It is aimed at high energy users and particularly sports enthusiasts. The drink is orange flavoured and is high strength so that only one sachet a day is required.

One pack contains 14 of the 25g sachets (£2.24 a pack), and there are 24 packs per outer. Included in each outer is a promotional pack consisting of display dispenser, window sticker, and four shelf stickers. *Valesto Ltd, Unit 7, Riverside Industrial Estate, River Way, London SE10 0BE.*

Janssen Going places.



**Watch this space for
more ethical products
for counter prescribing
from
Janssen.**



Further information is available on request from
Janssen Pharmaceutical Limited, Janssen House, Marlow, Bucks. SL7 1ET.
Telephone: Marlow (06284) 71744. Telex: 847788.

Revlon: 'A fresh approach for servicing pharmacy accounts'

This week Revlon are sending a new 14-strong, chemist-only salesforce out to detail the company's fresh approach for servicing pharmacy accounts. Chemists stocking Revlon or Charlie cosmetic ranges will be asked to display one of a new range of merchandisers containing a reduced number of lines. All the stock to be held is displayed on the unit. Stock sold will be replaced on a four or six weekly basis by the representative and on each visit he will offer a single promotion.

The "Universe" merchandising system is the culmination of Revlon's realisation that chemists have, as managing director Tedd Thomas told *C&D* "Special needs and sell in a special way". The product mix and spacing on the stands is based on rate of sale and market needs and comprises the "faster selling lines more appropriate to self-selection."

Stockturn improvements

Inventory control will be through a stock book system, but essentially only stock sold off the stand will be replaced in an attempt to improve the chemists stockturn from less than 1½ times a year to nearer the department store's three times a year.

All stands carry lipstick testers in pans, not bullets, and some, eye shadow testers. The stands are designed to be simple to clean and maintain and are modular, so that any modifications to the ranges carried can be accommodated over their expected two-three year life. They incorporate gravity feed to ensure "maximum stockholding, product visibility, space efficiency and colour impact."

The independent chemist has a choice of two Charlie stands — a 30in

The two smaller stands introduced by Revlon both measure 30in. The Charlie counter stand (left) holds 351 pieces worth £716 at retail and the Revlon "Universe" (right) holds 359 pieces worth £934. In all, there are seven new stands

wide × 21in deep counter unit containing 351 pieces worth £716 at retail or a 28¾in free-standing unit (523 pieces, £942 retail). A 30in wide counter unit for Boots is 30in deep and carries slightly less stock (£675 retail).

No less than four counter and one free-standing unit make up the Revlon cosmetic "Universe" range for the independent chemist. At the same depth as the Charlie units, the 30in, 45in, 60in and 75in units contain stock worth £934, £1,211, £1,482 and £1,614 at retail. Boots units are an extra 9in deep and carry stock worth £972, £1,273, £1,544 and £1,845 in the same widths.

Delivery dates

All existing chemist outlets should have been visited by the end of February and the units will be delivered from the end of January. The company will then approach potential new stockists. Revlon expect that some of the present stockists may not wish to commit themselves to holding the stock involved and maintaining a full inventory. Chemists who stock Revlon and Charlie fragrance only, may continue to do so, although no such new accounts are to be opened up. Call frequency is likely to be four times a year with the main emphasis put on Christmas sell-through.

Tedd Thomas sees the "Universe" merchandisers as the culmination of his year-long endeavour to reduce stockholding and produce a realistic range presented with impact and able to generate the profit required by both the company and chemist.

With promotions designed to sell out in four or five weeks the aim will be to undersell if anything, says Tedd Thomas. New introductions are likely to be priced

below £5 per unit at retail.

A new one-day training school is to be started with time split 1:2 between product knowledge and selling skills. Revlon International Corporation, 86 Brook Street, London NW10 6NU.

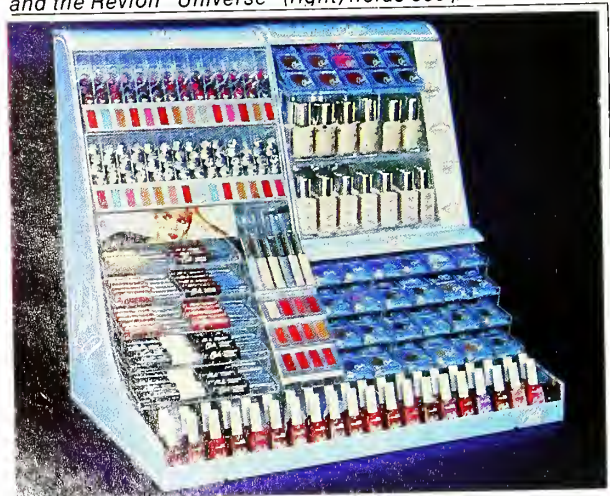
Bayfresh relaunch in time for Spring

Bayfresh Flowers solid air fresheners are being relaunched in a new range of colours. The existing red rose (£0.78) will be retained, while a two-tone yellow and red rose and a yellow sunflower are to be added to the range. Packaging has been redesigned, and advertising is planned for later in the year. *Bayer UK Ltd, Consumer Products Division, Bayer House, Newbury, Berks RG13 1JA.*

Vichy to advertise on breakfast TV

To support Les Matinales Vichy are to run, from early February, a consumer competition with 2,000 pink towelling bath robes as prizes. Entry forms will be supplied to all chemists stocking the Vichy range and will also appear in *Cosmopolitan*, *Good Housekeeping*, *Vogue* and *Women and Home*. The competition consists of simple beauty questions and entrants are required to provide one proof of purchase.

The range will also be featured on breakfast television from February 1. One 30 second spot will be shown each week day for the four weeks of February. Additional support will appear in the major women's monthlies during February and March. *Vichy UK Ltd, Ashville Trading Estate, Abingdon, Oxon.*

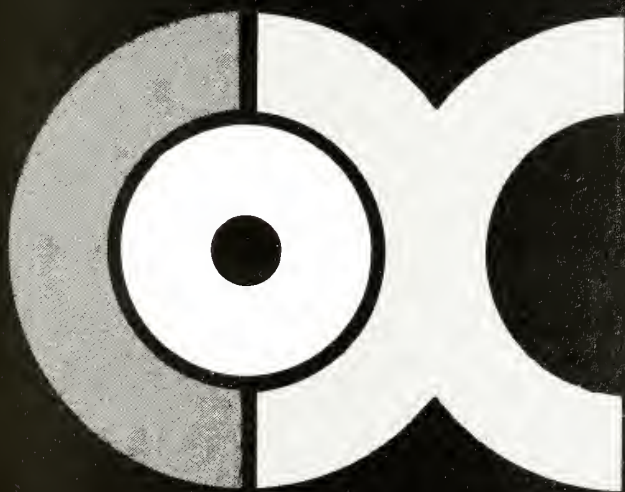


The Directors and Staff of
**Arthur H. Cox & Company
Limited**

wish all their many customers an
enjoyable and prosperous
New Year

We look forward confidently to
continuing to supply you with
products of the highest quality at
competitive prices during the
coming year.

We have been making
pharmaceutical products since
1839 and now in our new custom
built factory we are even more
committed to a continuing
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just for 1983 but for the **next** 100
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Their Colours



Donna Hartley, twice Gold Medallist at the Commonwealth Games, presenting the Kodak Gold Award for Quality to the staff at Colourcare Photoservice, Chester. Left to right: David Dunn, Quality Control Supervisor; Donna Hartley; Geoff Cadogan, Manager; Finisher Sales Kodak Limited; Jeanne Barwise, Laboratory Manager; and Tony Smith, Production Manager.

are was best.

Colourcare Photoservice, Chester (formerly trading as Upcolour Ltd.), has won the Kodak Gold Award for Quality (July-October).

Donna Hartley, Olympic athlete, presented the Award to staff of the laboratory on 2 December, 1982, at their Chester premises.

"We pride ourselves on the good quality service which we offer to customers from North Wales to Merseyside," said Jeanne Barwise, Laboratory Manager.

"We have won Kodak awards before, but this is our first in the more demanding Gold Award scheme which tests consistently top quality results."

Kodak organises the Award scheme to maintain high film processing standards nationally.

Regular checks are made on all laboratories using 'Kodak' paper and formulated chemicals by the Kodak Monitoring Service. Kodak also sends in anonymous films for processing and awards points for near-perfect results.

Laboratories win a Silver Award for gaining high enough scores to appear in the monthly table of Merit for two consecutive months. The Gold Award is given to laboratories

maintaining this standard for four consecutive months.

There were no Silver Awards for the period October and November, 1982.

Table of Merit, November.

The following seven companies have achieved a place this month:

Belmont Photo Works Limited, Belfast.

Colourcare Photoservice, Chester.

Colourcare Photoservice, Liskeard.

Forest Photographic Limited, London.

Grunwick Processing Laboratories London, Borehamwood, (Darkroom Service).

Munns Brothers Limited, Birmingham.

R. H. Williams, Haverfordwest.

The Kodak Award for Quality.

The competition is open to all independent photofinishers who use KODAK 'Ektacolor' Paper and formulated chemicals. Kodak and its subsidiary companies are excluded.

All photofinishers who regularly and continuously return full sets of quality monitoring strips to the Kodak Monitoring Service are automatically included in the scheme, which runs from April to December, 1982.

Smile. It's on 'Kodak' paper.



© 1982 Kodak Ltd.

£¾m advertising spend behind relaunched Poly hair colourants

Warner-Lambert announce a major relaunch for the Poly range of hair colourants and lighteners with the biggest-ever investment behind the brand.

The relaunch is backed with a £750,000 television and women's Press advertising campaign starting in April.

The campaign will highlight Polytint as the leading colourant for 100 per cent permanent grey hair coverage and seek to remove any confusion about the difference between Polytint and Polycolor.

All four products, Polyblonde, Polycolor, Polytint and Polyfair (£1.95 each), come in newly-designed packs with each shade depicted on the front by a model and a shade guide on the back in both written and pictorial form.

Sachets of after-colour conditioner have been added to Polycolor, Polyblonde and Polyfair, while Polytint packs now include a sachet of after-colour shampoo.

Polytint has also been increased in quantity to enable longer hair to be coloured. The eight shades remain unchanged. Polyblonde has been



reformulated and is now a shampoo-in product as well as being suitable for retouching root regrowth. Contents have also been increased and a light ash blonde shade added to the two existing shades. Polycolor is still available in 12 shades, but a new light golden brown replaces golden brown.

POS material includes shelf units, window cards and hair swatches and the relaunch will be backed by a Press campaign which will include a 32-page booklet on hair colouring and perming. A quarter of a million copies will be distributed to consumers. *Warner-Lambert Health Care, Southampton Road, Eastleigh, Hants SO5 5RY.*

Wellcome addition

Wellcome are adding Snobuds cotton buds to their range of Macdonald's cotton wool. Snobuds come in two colours, pink and blue, and are packed in pots of 100 (£0.49) and a shrink wrapped tray of 12. *Wellcome Foundation Ltd, Crewe Hall, Crewe, Cheshire CW1 1UB.*

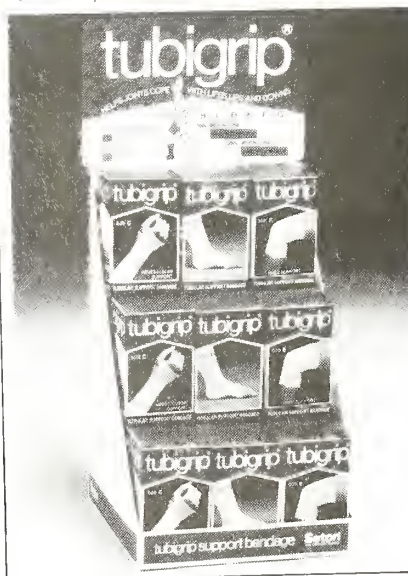
Two Boots specials from Neutrogena

Neutrogena, the Californian based skin care company, will be participating in two special promotions with Boots this year.

A new 28g handbag-size pack of Neutrogena's Norwegian formula hand cream will be available in Boots from mid-January through to the end of March. The tube should give over 100 applications, says the company, and costs £0.89.

The second promotion will run in conjunction with Boots own brand Pamperhands rubber gloves. In March 100,000 Pamperhands' packs will contain a leaflet and a coupon for 20p off next purchase of the cream. The cream is distributed for Neutrogena (UK) Ltd by *Farillon Ltd, Bryant Avenue, Romford, Essex RM3 0PJ.*

As part of Tubigrip's retail launch, (C&D last week, p14), Seton are offering chemists a starter pack containing six of the three most popular sizes in the new carton design. The pack also includes a free counter dispenser, leaflets, POS material, sizing guide, and a tension guide for measuring limbs. The launch is being supported by television and national Press advertising. *Seton Products Ltd, Tubiton House, Medlock Street, Oldham, Lancs*



Merger leads to rationalisation

The Smith Kendon product range has been rationalised, although the top selling items such as the 200g tins of travel sweets/glucose tablets, Altoids, Skels pastilles and lollipops have been maintained.

This move follows the merger of the company with Callard and Bowser, Nuttall Ltd eight months ago "to form a much stronger supplier of confectionery products to all types of trade outlets, including the chemist trade".

With a salesforce now numbering 60, the company says it will be able to give independent chemists at least an eight weekly call, more frequent for wholesalers. All invoicing will now be via Callard and Bowser at Hayes until the new head office at Bridgend is ready later in the year. *Smith Kendon Ltd, Waterton, Bridgend, mid-Glamorgan CF31 3DJ.*

RV takeover of Roche completed

Richardson Vicks have now taken full responsibility for the Pantene hair care range, Moncler Derma skin care preparations and the Eversun and Aquasun sun protection products. This follows the recent agreement between Richardson Vicks and Hoffman La-Roche (C&D December 11, 1982 p1066).

Redoxon and the rest of the Roche vitamin range remain the responsibility of Roche Products Ltd. All orders or inquiries regarding the transferred products should now go to *Richardson Vicks Ltd, Rusham Park, Whitehall Lane, Egham, Surrey TW20 9NW (tel 0784 34422).*

Press support for Elnett

An advertising campaign for Elnett hairspray will run in the women's Press until April. The double-page colour spreads will be featured in major women's magazines including *Woman's Own, My Weekly, Woman and Home, Good Housekeeping, Woman's Realm, Vogue* and *Woman's Weekly*.

There will also be a consumer promotion at point of sale. The Elnett cheque coiffure offers the consumer the chance to enter a free draw for hairdressing vouchers. *Golden Ltd, 30 Kensington Church Street, London W8.*

There's a lot to be gained from playing safe.



Elastoplast is the brand leader in first-aid dressings. In 1983, sales are going to be higher than ever.

Because, in January Elastoplast are launching their biggest ever consumer promotion. It's called Safety Street, and it's a road safety competition for children.

We'll be giving away 400 Raleigh bikes as prizes, and spending £750,000 on TV advertising during 1983.

Backed by ROSPA, Safety Street will also be receiving maximum PR coverage throughout the competitions duration.

Exciting point-of-sale material will be available to ensure that interest is generated in store.

Of course, every child's entry must be accompanied by a bike token from the special Safety Street packs of Elastoplast.

Elastoplast is the only brand of it's kind to receive heavy television support.

As demand for Elastoplast is bound to be enormous, you'd better prepare yourself for Safety Street. Because this is one road safety programme that will definitely cause an increase in traffic.

Elastoplast
SAFETY STREET

Andrex experience used in Scotties relaunch

Bowater-Scott are relaunching their facial tissue range and introducing a new Scotties collection. Our experience in developing the quality of Andrex toilet tissue has enabled us to significantly increase the softness of Scotties facial tissues without any loss of strength or absorbency, they say.

All the products now have a brighter tissue colour and more attractive packaging design, and all boxes are flashed "brighter than ever".

The woodland flowers brand has been withdrawn and replaced by chic which comes in cube shaped cartons of pink, green, blue and lavender tissues. The cube carton has been updated and the perforated top now makes for easier access.

Six pastel colours

The existing Scotties rainbow brand now has brighter, pastel tissues with improved packaging and product softness. White is no longer included in the rainbow range which now includes up to six pastel colours. The standard Scotties range also comes in floral packaging of 150 and 200 sheet pack sizes. Mansize and tri-ply also have increased softness and new packaging.

Shelf strips and price cards incorporating the three designs are available and sales promotions will support the range throughout the year.

The boxed facial tissues market grew by 12.7 per cent in 1982 to £71m although



Bowater-Scott have simultaneously repackaged the Scotties collection

the company estimates that the actual number of boxes sold will fall by one per cent in 1983 to 166.8 million (1982 saw a 3.3 per cent decline over 1981 to 168.4 million). Own-label brands lead the market with a 40 per cent share says the company. Kleenex are credited with a 24 per cent share, Scotties 17.3 per cent and Dixcel 6 per cent. Breaking sales down into outlets, own-label take 56 per cent of sales in retail pharmacies, Kleenex have a 31 per cent share, and Scotties 9.4 per cent.

The pocket pack market for 1982 stands at 68.3m units worth £8.2m. This is an increase of 2½ per cent (1981, £8m) although the company expects it to continue declining in unit terms. Chemists have a 22.4 per cent share of the market and Handy Andies account for 59 per cent of these sales. *Bowater Scott Corporation Ltd, East Grinstead, West Sussex.*

answering inquiries. It explains in simple terms all about menstruation and emphasises the benefits of the Tampax-type tampon.

Two free booklets will be enclosed with the first Numark promotional merchandising kit in the New Year. Further free copies from: *Numark, 51 Boreham Raod, Warminster, Wilts*

Colgate-Palmolive are relaunching and repackaging the Palmolive shaving preparations.



Peaudouce child size gets £2m backing

Peaudouce are adding a child size to their Babyslips range of disposable nappies; it is designed for larger babies and toddlers up to the age of five (33-55lbs).

This new nappy has all the features of the smaller sizes and comes initially in a handpack of eight (£1.39) and an economy box of 20 (£2.99).

A £2m budget in support of the launch will include a national television campaign, magazine advertising, sampling in the women's Press, and a promotional programme via health visitors and hospitals. *Peaudouce (UK) Ltd, Lockfield Avenue, Brimsdown, Enfield, Middlesex EN3 7PX.*

Twin-pack offer on toothpaste duo

Beechams are launching simultaneous twin-pack offers on Macleans and Aquafresh toothpaste "Competitive prices" will be available on twin packs of the 50ml, 85ml and 125ml sizes. *Beecham Proprietaries, Beecham House, Brentford, Middlesex TW8 9BD.*

ON TV NEXT WEEK

| | | |
|---|-----------------|-------------------------|
| Ln London | WW Wales & West | We Westward |
| M Midlands | So South | B Border |
| Lc Lancs | NE North-east | G Grampian |
| Y Yorkshire | A Anglia | E Eireann |
| Sc Scotland | U Ulster | CI Channel Is |
| Algipan: | | So |
| All Clear shampoo: | | All areas |
| Anadin: | | All areas |
| Askit powders: | | Sc |
| Aspro Clear: | | All areas |
| Baby Wet Ones: | | So, NE |
| Buttercup cough syrup: | | All areas |
| Crookes One-A-Day: | | All except U, CI & E |
| Denclen: | | Ln, M, Lc, Y, Sc, NE |
| Farley's rusks: | | All except U & E |
| Hedex: | | All except B, U, E & CI |
| Infasoft: | | All except E |
| Karvol capsules: | | All areas |
| Kleenex facial tissues: | | All except U, E & CI |
| Milgard: | | All except B, U, CI & E |
| Milton fluid: | | All areas |
| Paddi Cosifits: | | Ln, M, Sc, B, G |
| Ralgex: | | All areas |
| Rennie indigestion tablets: | | All areas |
| Scholl thermal insoles: | | All areas |
| Strepsils tablets: | | All areas |
| Sunsilk shampoo: | | All except E, CI |
| TCP antiseptic liquid and pastilles: | | All except U & B |
| Topex: | | All except U, B, E & CI |
| Vicks Sinex: | | All except U, B, E & CI |
| Vicks cough syrup: | | |

£3¼m 'better tasting' push by Bayer

Natrena sweeteners are to be backed by a £750,000 promotional campaign during 1983. The campaign, which will include advertisements on local radio and in the women's and slimming Press, aims to establish Natrena as "better tasting" than its competitors, without the problem of after-taste. Natrena packaging is also to be strengthened. *Bayer UK Ltd, Consumer Products Division, Bayer House, Newbury, Berks RG13 1JA.*

Sanpro booklet by Numark and Tampax

A booklet "So You Think You Know All About Tampons?" has been produced for chemist assistants to help them when

COUNTERPOINTS

PERFORMANCE WISE...

Lotussin gives effective relief for persistent, dry or irritating coughs.



PRICE WISE...

Lotussin is attractive to the customer at £1.08 per 100 ml pack.



PROFIT WISE...

Lotussin is competitive, especially with Searle's special bonus terms.



PHARMACY WISE...

Lotussin is exclusive to family chemists and backed by Searle service to the retail pharmacy.



Arden launch a new look

New formulas and new products in aubergine and gold packaging give Elizabeth Arden make up a new look for 1983.

Twenty fashionable Lipcreme shades (£3.50) are available with matching shades of nail perfection (£2.50). The shades range from pink expectations to golden chestnut.

For the cheeks there are six shades of powder blusher. Each compact contains a mirror and a natural hair, smooth-bristled brush. All powder perfection for cheeks shades (£6.50) are available in matching creme perfection for cheeks (£5.25). They are cocoa rose, glazed gingerberry, peach promises, pink expectations, breathless blush and fantasy blush.

Liquid perfection make up (£9.50) is described as six life-like shades of a maximum coverage foundation. Pale porcelain, hushed beige, gentle peach, tawny beige, honest beige and soft umber are the six shades available.

Perfect coverage creme concealer (£4.50) conceals dark under-eye circles and camouflages minor imperfections. Available in light or medium, it is said to blend instantly, leaving the skin looking even and unblemished. The formula is non-greasy and long-lasting and is presented in a transparent container with sponge-tipped applicator.

A powder eye shadow that allows for extra smooth applications is powder perfection for eyes available in single, double and triple compacts.

Single-tone compacts (£4.50) comprise iced butternut, deauville blue, aqua tint and goldlit brown; double-tone compacts (£5.95) are rainforest/ivory palm, starfire/starmist, pagan earth/pagan clay, aquamarine/aqua tint, breathless blue/breathless silver, goldlit

brown/champagne, loden gold/celadon gold, twilight teal/twilight blue and mood indigo/mood mist. The five triple compacts (£6.95) include mythical, midnight and fantasy shadows, bittersweet teals and romantic rainbows.

Lavish black, navy and brown (£4.50) are the three lavish lash mascara shades and the same three shades are available in the lavish lash waterproof mascara range (£4.50). Finally there is a gentle formula eye makeup remover (£4.25) which "dissolves even the most stubborn eye make up". The new Elizabeth Arden make up will be available from mid-March. *Elizabeth Arden Ltd, 13 Hanover Square, London W1.*

Holiday offer on Farley's Lessen

A money-saving offer in conjunction with British Airways is to run on Lessen packs February.

Running throughout the peak sales season, the promotion links Lessen with a major reason for its usage — getting in trim for the holiday season, say Farley Health.

The offer, an on-pack voucher valid until April 1984, will allow a £25 per person reduction on adult 14-day British Airways holidays booked from Sovereign and Enterprise brochures. The promotion also features an on-pack competition for a two week fly/drive Florida holiday with £500 spending money. It involves identification of three famous Florida scenes from the holiday brochures and completion, in not more than 12 words, of the tie-breaker, "Lessen saved me pounds. . ."

The Lessen promotional package is supported by POS material. Floor display units are still available, and there is a shelf "talker" and pack crowner. *Farley Health Products Ltd, Torr Lane, Plymouth PL3 5UA.*

THE WISE CHOICE FOR FAMILY COUGHS

COUNTER PRESCRIBE WITH CONFIDENCE

Lotussin

SEARLE

Searle Consumer Products Division of G D Searle & Co Ltd PO Box 53 Lane End Road High Wycombe Bucks HP12 4HL Lotussin and Searle are registered trade marks



COUNTERPOINTS

Dendron launch Stain Devils

Stain Devils, a range of stain removers designed to match individual stains, are being launched by Dendron.

In powder and liquid form, Stain Devils (£0.89) are to be used mainly for fabrics. The ten formulae are for coffee and tea, grease and oil, food and milk, ball point pen, tar and paint, felt-tip pen, fruit and wine, glue and chewing gum, mould and ink, and rust and iron mould.

A display unit 16 x 8 in holds 40 of the 50g bottles. Stain Devils will be available from January 25. *Dendron Ltd, 94 Rickmansworth Road, Watford, Herts.*

How tall is the Little Tough Guy?

Dixel are launching a £4,000 on-pack competition for their Little Tough Guy kitchen towel.

The theme is "Clothe your little tough guy for a year." A top prize of £500 and a further 60 cash prizes are offered.

Contestants must imagine the "little tough guy" on the front of the pack as a real boy and estimate his height. One proof of purchase is needed for every entry — closing date June 30. *British Tissues Ltd, 101 Whitby Road, Slough, Berks SL1 3DT.*

Mucron liquid renamed

Mucron liquid has been re-named Junior Mucron syrup. The new title accurately positions the brand as a paediatric in the parent-preferred syrup presentation, says the manufacturers. Neither formulation nor pack size has been changed.

International Laboratories Ltd, Wilsom Road, Alton, Hants.

'Nappy rash blues' goes on TV

Sterling Health are to back Baby Wet Ones with a £750,000 campaign.

The award winning "Nappy rash blues" commercial will be used on national television, and the company hopes that it will be seen by three out of every four mothers with babies.

There will also be colour advertising in babycare magazines, supported by product sampling. *Sterling Health, Sterling Winthrop House, Surbiton, Surrey KT6 4PH.*



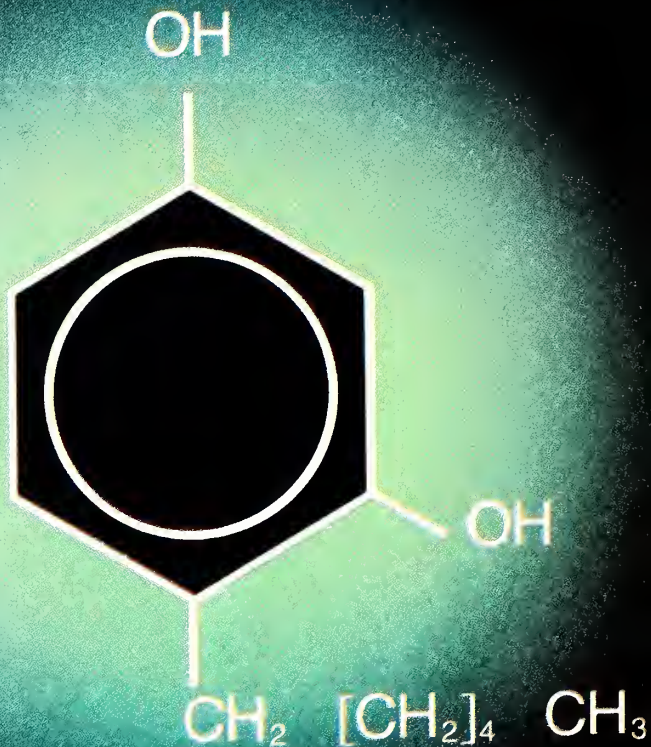
Fibre optics in the bathroom

A fibre-optic bathroom scale introduced by Newell Furnishings has an accuracy within 98.8 per cent, the company claims.

Powered by a 9-volt battery, the Counselor fibre optic scale (£20.00 plus VAT) comes in a choice of colours.

Newell Furnishings Ltd, Bay 3, Block B, Kidderminster Trading Estate, Spennells Valley Road, Kidderminster, Worcs.

It's what makes for sore throats



Stock a

Five additions to Pediform range

Comfort with style is the theme of Pediform's 1983 range of comfort footwear.

There are five additions to the range which is to continue to be sold exclusively through chemists. "Chemists are the ideal outlet for comfort footwear which is stylish and very much a health product," says a spokesman for De Witt International.

All stockists will be given full merchandising support which includes staff training, POS material and consumer leaflets. Retail prices start from £16.95. *De Witt International, Seymour Road, London E10 7LX.*



Tonicon bonus

Tonic Sweets have been renamed Tonicon and the 100s pack of lollies replaced with a new ISOS pack. The Pharmagen team will be offering a "four charged as three" deal on barley fruit while the barley sugar lollies pack is being phased out.

Pharmagen Ltd, West Lane, Runcorn, Cheshire.

Sucrets so good

Hexylresorcinol, the active ingredient in Sucrets, possesses antiseptic and local anaesthetic properties.

Add this dual action to the soothing demulcent effect resulting from Sucrets' "boiled-sweet" form and you'll quickly see why you can recommend these throat lozenges with confidence.

Did you know, though, that they can be strongly recommended for sales and profits too? It's a fact, ensured by advertising support, prominent displays and extra profitable deals.

Ask your Beecham Representative for details and stock Sucrets now. Customers who ask for them don't usually accept anything less.



Recommend Sucrets

Gallia searches for a star

Gallia are running a consumer promotion this Spring to find the Gallia Baby of 1983. The winner will collect a cash prize of £1,000 and be featured in future advertising and consumer literature.

Mothers who send in ten Gallia jar labels with their babies' photographs will receive a free Gallia bib. Leaflets and in-store posters will detail the competition which ends on May 31.

Gallia's support plan for chemists in 1983 will include magazine advertising, sampling activity, promotional support and a "professional services" programme. Gallia baby food is distributed by *Jackel & Co Ltd, Kitty Brewster Estate, Blyth, Northumberland.*

Make up kits for sensitive skin

Queen Cosmetics have introduced a kit aimed at those people who are diffident about using cosmetics on sensitive skin. It includes an eye shadow duo, blusher, Kohl eyeliner pencil, mascara, translucent face powder, and lipstick in three colour selections — delphinium, woodland, and English rose — and is being offered at a special price of £15.00 (normal retail price £18.00).

Another offer is the care and cleanse kit comprising 12 trial sizes, either 15g or 30ml, of the Queen skin care products; offer price £7.50 (normal retail price £10.00).

If both kits are purchased at the same time there is a further reduction — offer price £20.00 for the two. *Queen Cosmetics Ltd, 34b High Street, East Grinstead, Sussex.*

Neutrogena sizing

The Neutrogena rainbath shower and bath gel is now available in an 87ml bottle (£1.50). *Neutrogena (UK) Ltd, 2 Mansfield Road, South Croydon, Surrey.*

Elida shampoos on television

A £1.5m television advertising campaign for All Clear anti-dandruff shampoo starts with a £500,000 burst in January and February.

A new 30-second version of the "full treatment" commercial will present All Clear as "the shampoo which is tough on your dandruff and kind to your hair."

Sunsilk cosmetic shampoo is to be supported in 1983 with a £1.3m television campaign. An initial burst in January and February features the "Sunsilk — the sun in your hair" commercial. There will also be promotional packs. *Elida Gibbs Ltd, PO Box 1DY, Portman Square, London.*



Early last year, Healthcrafts launched Ladycare.

Ladycare is a range of safe, natural dietary supplements created specifically for women.

And it's a totally new concept in the vitamin market.

We researched and developed three different formulations of vitamins and minerals.

Each was designed for women at a potentially problematic stage of their lives.

Ladycare No.1 is for use during the menstrual cycle.

Ladycare No.2 is specially formulated for the menopause.

And Ladycare No.3 is specifically for the over 50's.

We felt there was a genuine need for such a product.

Women obviously agreed, because the response was overwhelming.

Stimulated by a £½ million advertising campaign, both initial sales and repeat purchases were equally high.

Within four months, the orders from

one major high street retailer alone increased by 400%. And in the same period, overall distribution improved considerably.

It seems that Ladycare is a natural.

The product is right, the advertising is sympathetic and understanding.

The merchandisers in store are attractive, the leaflets helpful.

For you, the profit per square foot is excellent, and the opportunities for growth are enormous.

There's a potential target market of 17½ million women, many of whom are likely to try a product like Ladycare at some point in their lives.

In February this year there'll be a new £¼ million burst of our consumer campaign in women's magazines.

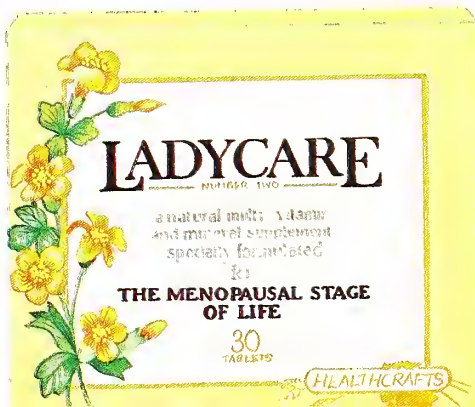
The demand for Ladycare will be greater than ever.

And by Springtime, your sales should bloom.

For more information, contact Len Weston, Customer Services Manager on Byfleet 44402, or talk to your nearest wholesaler.

THE FUTURE LOOKS ROSY.

MARCH 1982





JANUARY 1983

LADYCARE

a natural multi-vitamin
and mineral supplement
specially formulated for use during
THE MENSTRUAL CYCLE
with
VITAMINS B6 AND IRON

30
TABLETS

HEALTHCRAFT

LADYCARE

a natural multi-vitamin
and mineral supplement
specially formulated
for
**THE MENOPAUSAL STAGE
OF LIFE**

30
TABLETS

HEALTHCRAFT

LADYCARE

a natural multi-vitamin
and mineral supplement
specially formulated
for
THE OVER 50's

30
TABLETS

HEALTHCRAFT

C&D camera test: Agfa 110 with versatile case

Agfa Sport 110. Made in Western Germany and distributed in the UK by Agfa-Gevaert Ltd, 27 Great West Road, Brentford, Middlesex TW8 9AX.

This is an interesting reminder that the 110 format is still alive, although sadly enough this camera will probably be the last of the line from the Agfa plant in Munich, the shutting down of which has recently been announced. It is an attractive presentation in a bubble pack reminiscent of a brief-case with carrying handle.

The external finish of the camera is deep red and black plastic, with the name boldly along the top surface; the mating flash is very small and wholly black (it is detachable, and has to be taken off the camera for loading). However, it is the carrying-case, with its shoulder sling, that is unusual. It, too, is made from a deep red plastic to match the main part of the camera body. The suppliers claim only "water resistant" — just as an experiment, camera and case were taken to the local swimming-pool. It does *float*, surprisingly enough, but forced down to about 5 feet it begins to leak very slightly, despite the screw-on cap and the plastic sealing O-ring.

The camera, and flash, were tested in the usual way indoors and outdoors. The motor-powered film-advance makes handling very simple. There are only two "weather-symbol" controls to worry about: *Cloudy* and *Sunny* and these are fully explained in the multi-lingual instruction booklet which is also illustrated in detail.

The overall performance is good with 6 by 4in enlargements full of sharp detail from the standard C&D black-and-white film tests under conditions which any amateur or good professional laboratory ought to be able to duplicate. Although a tripod bush is not fitted, our tests were carried out with a firm support to ensure the best results from using the camera.

The shutter release is both positive and smooth. This is an important point because it helps to avoid camera movement shake that very often detracts from successful use of any camera.

The whole outfit is a worthy addition to the long line of cameras, in all formats, which have come from the Munich factory over the past thirty or forty years.



Agfa Sport — 110 format

Country of Origin: West Germany.

Distributor: Agfa-Gevaert Ltd, 27 Great West Road, Brentford, Middlesex TW8 9AX, tel. 01-560 2131.

Lens: f/8 Color Apotar.

Shutter: 1/50, 1/125 and 1/200th second.

Features: Simple weather symbol control; powered film-advance; detachable electronic-flash separately switched. An expandable flash-bar may also be used in lieu of the electronic-flash.

Batteries: Two size AAA, Mn2400 or equal.

Accessories: Carrying-case, weather resistant. Instruction book (multi-lingual). Guarantee registration card.

Dimensions: Camera - 4 3/4 x 2 x 1 1/8 in (120mm x 52mm x 29mm).

Flash - adds 2 1/4 in (57mm) to length.

Case - 7 in x 2 3/4 in (185mm x 70mm).

Weights: Camera - 6oz (170g) includes batteries and film loaded. Flash - 2oz (57g). Case - 5oz (142g).

Srp: About £25.

Availability: Now. ■

Express slide mounts and press from Gepe

The new Gepe express slide mount offers a fast and simple method of mounting slides at a very low cost, says the company.

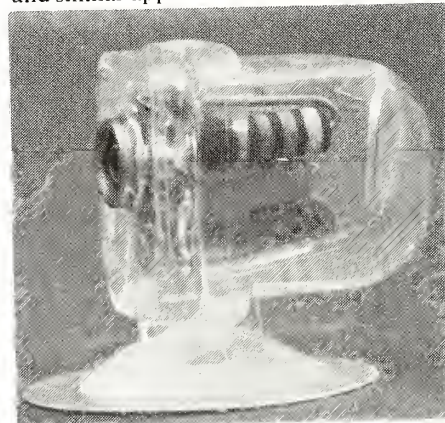
The mounts are glassless and specially shaped, with hinged side-pieces that ensure firm retention of the film and correct positioning of the mount.

They can be closed by finger pressure or by using a mounting press. A cutting attachment is soon to be introduced. The Gepe express slide-mount kit of 100 mounts plus press costs £3 and additional packs of 100 mounts £2.25.

A new hand mounting press for the larger size Gepe slide mounts is now available. The press caters for the Gepe 7 by 7 size mount. An interchangeable base (optional extra at £2.25) also enables 85 x 85 mounts to be used. *Photopia Ltd, Hempstalls Lane, Newcastle, Staffs ST5 0SW.*

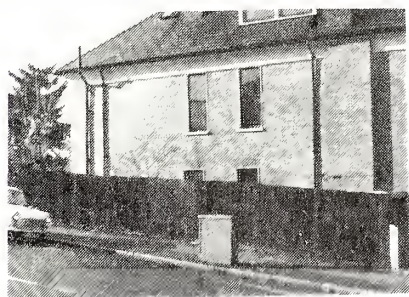
Sportslite slave can fire larger units

Photopia Ltd are now importing a flash slave-unit able to fire all larger units say the company. Sensitivity of the Sportslite slave is adequate for set-ups of small, clip-on flash units, as used in home portraiture and similar applications.



Less than 1in high, and around 10g in weight, the perspex-encased cell is backed by a female coaxial socket, for cable connection to a flashgun. A sucker base permits the slave to be instantly attached to any convenient smooth surface, even the flash unit itself.

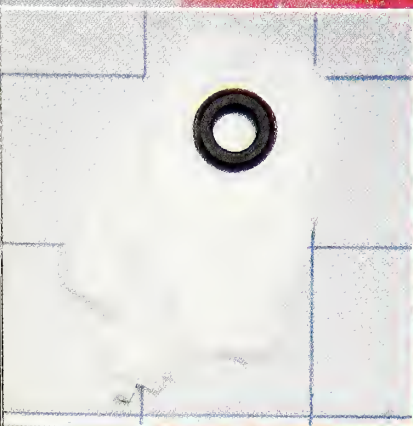
The unit sells at around £5.95, complete in a neat carrying case. *Photopia Ltd, Hempstalls Lane, Newcastle, Staffs ST5 0SW.*



Two typical enlargements. (One 'infinity' shot and one close-up)

The fact that you can't see it may be the least of its benefits.

- straight forward fitting and removal
- secure adhesion that allows the skin to breathe
- protection for the wearer and for the bag from urine flow-back
- clean and simple emptying
- outstanding protection against leakage
- virtual elimination of peristomal wafers
- easy night drainage



The Lo-Profile* urostomy bag by Hollister certainly lives up to its name. Its special design and shape ensures that it passes unnoticed under clothing. You can be sure, however, that its other benefits will not pass unnoticed by your urostomy patients. Take for example the drainage tap. It's so much more convenient and hygienic than the plugs or bungs found on some other appliances. Then there is the protection against leakage with the Karaya 5* seal and the secure adhesion of the new Microporous II square, not to mention the new easy-to-fit night drainage tube. In fact the more you see of the Lo-Profile* urostomy bag by Hollister, the more you may come to think it deserves a high profile.

Lo-Profile* urostomy bag by Hollister.
Probably the most advanced urostomy bag in the world.



a product of
HOLLISTER*

*TRADEMARK OF HOLLISTER INCORPORATED, LIBERTYVILLE, ILLINOIS, U.S.A.

Abbott Laboratories Limited, Queenborough, Kent ME11 5EL.

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ABBOTT

For high quality drugs at low prices, just pick up the phone.

Pick up the phone and call your wholesaler.

That's all it takes to obtain all the drugs you're ever likely to need – from the Evans range.

Evans comprehensive range includes the new Generics, Standard drugs, OTC's, Insulins and Heparins.

They're available in any quantity you want, any time you want them. And at new low prices.

Some prices have been reduced by as much as 70%.

There will also be special offers running on a selection of drugs.

But though our prices have been cut, we still don't cut corners.

So for high quality drugs at low prices, ring your wholesaler, and make yourself happy.

Evans. Relieving pharmacists' headaches.





Evans
MEDICAL LIMITED

PHARMACY WINNERS



One of the winners in Numark's "Know your neighbourhood" competition was 15-year old Jenny Pickford of Marple, Cheshire, who is pictured being presented with a bicycle by a Numark representative and local pharmacist, Mr K. Bird of Yates Chemists, Stockport. Mr Bird received a matching gold pen and pencil set for supplying Jenny with her winning entry form



▲ Mr Kenneth Liu being presented with a festive hamper as a prize in the Pharmaton Capsules Autumn Promotion. Mr Steve Beavan, Vestric's Liverpool branch manager, left, and Mr Roy Rylands, Pharmagen representative, right, presented the award. There were nine other winners



▲ Mr P. Harris (centre) of J.K. Taylor & P.H. Harris Ltd, Darley Dale, Derbyshire, receives a Debenhams gift token for £100 — first prize in the Listermint lucky draw for October 1982. Mr John Meads, national account manager, Warner Lambert; and Mike Devall, Unichem's Sheffield branch manager, look on



▲ Beecham salesman Mark Gazzard presents Mr R. Day of Demnox Chemists, Farringdon, Sunderland with a complete video system — first prize in the joint Vestric Beecham "free view special" competition — in the presence of Vestric branch manager, Mr P. Chambers, and senior buyer, Mr E. Fitzpatrick



▲ Mr E. Silver (left) of A.D. Grants Chemist in Harrow receiving his cheque for £50 from Mr J.A. Troup (right), general manager of Medo & Sanol Schwarz Pharmaceuticals Ltd, for the best Pholcomed window display. They are watched by Mr P. Partos, area representative for Medo Pharmaceuticals Ltd

Pharmacist Mr ▶ Gerald Bounds and his wife, of Seaford receive a magnum of champagne from Soler Touriste managing director, Henry Soler (left), for making the 2000th holiday booking in 1982 through Soler Touriste — Unichem's travel agency





Seton's entry into the retail market is one of the best pieces of news that chemists have had in years.

Promising as it does a considerable surge in several product groups which are potentially very fast moving indeed.

First to spring into action is tried, tested and trusted Tubigrip.

Backed by a smart new retail pack, an eyecatching new dispenser, powerful advertising in the national press and a memorable live action TV campaign* (look out for the Tubigrip trampolinist – and join him on the up and up).

Salvelox – Europe's best-selling plaster – is about to get off to a flying start with a point-of-sale campaign that highlights the product's speed, ease of application and profit potential for chemists everywhere –

and only chemists are in the running to sell this unique product.

All this (and quite a bit more) springs from Seton, one of Britain's most successful and soundly based companies in the field of health care.

That success is set to rub off on retail chemists throughout the country.

So join Seton in these exciting new and potentially highly profitable ventures.

And get on the up and up yourself.

* initially in the Granada region (equivalent to £600,000 nationally)

Seton[®]
THE 'TUBIGRIP' PEOPLE

Seton Products Limited, Tubiton House,
Oldham OL1 3HS. Tel: 061-652 2222 Telex: 669956

Join Seton
on the up and up.



Buying a pharmacy — the season of goodwill

by Eric A. Jensen BCom, MPS, FIPharm, MInstM.

The first step is to arrive at a pure profit figure for any business under consideration or at an estimated figure if the plan is to start a new pharmacy. There are at least two schools of thought as to how pure profit should be defined and it is crucial that we are consistent in use of the term when putting principles into practical effect.

When an adjusted net profit has been calculated along the lines described in an earlier article in this series (*C&D*, June 26, 1982 p1164), the pure profit can be reached by simple deducting the salary the pharmacist manager of such a business can currently command, if such salary has not already appeared in the accounts. Alternatively one can deduct this salary and also the interest the total amount to be paid for the pharmacy could earn if invested elsewhere in a "safe" investment. Where a business is conducted by a full time employee pharmacist, with part time engagement only by a pharmacist owner, an appropriate allowance should be made.

Specialist advice

Once a pure profit figure has been assessed for the pharmacy under review this is compared with goodwill values in the market at the time. It is important to try and ascertain what amounts are being obtained by vendors as distinct sometimes from prices asked. Here the advice of specialist agents with wide market knowledge is of great benefit. The prospective buyer can collate valuable information by careful study of advertisements in the pharmaceutical press and elsewhere, and of business particulars supplied by sellers or their agents.

The relationship between the annual pure profit and the price asked for goodwill should be calculated for pharmacies of around the size sought, so that relevant market knowledge is accumulated. The larger the scale of the research, the greater the significance, and a pattern will become apparent in which a few pharmacies show an exceptionally high or exceptionally low ratio between goodwill price and pure profit; in between will lie the bulk of the businesses.

The ratios will vary with market conditions, interest rates, management salaries and other factors, but let us assume for our purpose of illustration that the range is from one to three times one

year's pure profit for goodwill.

Any business under examination should now be placed somewhere in this scale by taking into reckoning all the factors giving rise to goodwill, that is trading position, personality, people, social amenities, competition, security of tenure. For example, a pharmacy with first class living accommodation, a rising trend of profitability, a long lease and a desirable location would tend to rate at the top of the scale. While another with poor or no accommodation, in a particularly depressed area, with new competition and fluctuating fortunes, would be at or near the bottom of the table.

Personal preferences

Here it is emphasised again that personal preferences must not be discounted, and that the same business can be worth differing sums to various potential buyers. Under such circumstances there can be no rule-of-thumb formula for goodwill. As we shall see there are exceptional cases where the normal rules do not apply.

The disciplined approach outlined should ensure that gross errors — either of overpayment or of failure to recognise latent opportunity — are avoided. If an excess of stock is purchased the situation is usually retrievable, at least in part, assuming the valuation has been on the "good, clean, saleable stock" basis. An overpayment for goodwill is likely to be made up only if one market-ignorant or imprudent buyer is succeeded by a second. The true loss might well be masked by inflation but it still normally remains.

Element of risk

Goodwill assessment must be a blend of art and science, of calculation and business judgment. There is always an element of risk and it is for the purchaser to decide how big this risk is and how far he or she is able and prepared to speculate. The method suggested is in essence comparative, and logically so,

since all prices are relative and are otherwise meaningless.

Many instances could be given of the traps inherent in claiming that goodwill is "x" times net profit. First, without knowing how the net figure has been arrived at, how much if anything the owner has paid him or herself before computing the profit, what outgoings would not necessarily be applicable to a new owner or what additional ones there would be, we are working on unstable grounds from the outset. And even if the net profit is a true indication, there are still difficulties.

Consider two pharmacies, each with an annual average net profit over the last three years of £10,000. In one case this average might be reached from figures of twelve, ten and eight thousand pounds on a downward trend, in the other from similar figures on the reverse trend. Clearly the latter would command a higher goodwill, other things being equal. Another obvious example is where there are two pharmacies with more or less identical results to date, but where one has recently suffered additional competition, either within or outside the profession.

Yield on capital

Another approach to goodwill evaluation, also employing the pure profit figures is by the yield on capital method. Here we calculate the percentage return on capital invested in a number of pharmacies similar to the one under investigation. If, for example, it is found that the average return is, say 20 per cent, we could decree that the maximum total price for the business should be no more than five times the pure profit, this providing a yield of 20 per cent. It must be stressed that the total capital to be invested must be used, that is the price of lease / goodwill, plus stock, plus fixtures and fittings etc.

It is furthermore essential in this calculation that pure profit *before* deduction of interest from a safe investment should be employed. We are concerned with finding out whether the total investment required will provide a realistic return, bearing in mind that we are looking at a commercial risk proposition and that we aim to compare the venture with the yield obtainable currently from other investments of varying risk. Should a freehold property be involved we ought to remember that property does not normally show as high a return on capital as do more risky investments.

The procedure would be to deal with the capital to be invested in the business as a separate calculation, after ensuring that the pure profit has been calculated at after debiting a current commercial rent against

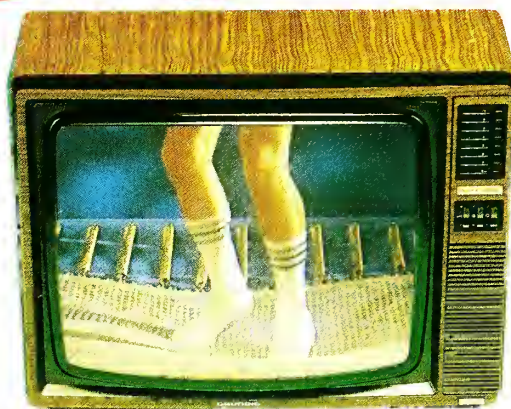
Continued on p72

Get on the up and up with Tubigrip.

Things are really looking up!
Because now Tubigrip – for
years Britain's foremost support
bandage – goes retail.

Over the counter at chemists
everywhere.

It's supported by one of the
bounciest launches you've seen in
years.



With every aspect of the campaign calculated to put
Tubigrip uppermost in the consumer's mind.

There's a smart new retail pack, an eye-
catching new dispenser and full supporting
point-of-sale material.

Powerful advertising in the national press.

PLUS a memorable live action TV
campaign.* (Look out for the Tubigrip trampo-
linist and join him on the up and up.)

The new 1m and 1/2m packs are available now.
So stock up – and join us on the up and up.

*initially in the Granada region (equivalent to £600,000 nationally)



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PHARMACY ECONOMICS

Continued from p70

Goodwill Evaluation

the profits. This rental is naturally related to the value of the property in the present market, with the business there and not with vacant possession.

Return on business capital reflects profits and profits depend on markets, on the interaction between supply and demand. How the market works is modified by any distortion of market conditions, by monopoly or monopsony or by any imposed restrictions on the free movement of resources of every kind. The effects of supply and demand vary between OTC and NHS aspects of pharmacy but they are powerful in each

sector. Can we doubt that if the number of pharmacists and/or pharmacies were to double or to fall to half the present number there would be repercussions throughout the whole range of pharmaceutical activity, regardless of whether the government or the customer visiting the pharmacy is the paymaster?

Yield method

Under the "yield" method the goodwill of even a highly profitable pharmacy can be severely depressed and possibly appear negative if the stock and fixtures are of exceptionally great value. On the contrary, goodwill could be grossly inflated if the stock and fixtures are low in value. Rigid application of a percentage yield formula would offend business wisdom, and could result in substantial over-payment for goodwill or conversely in rejection of an excellent opportunity.

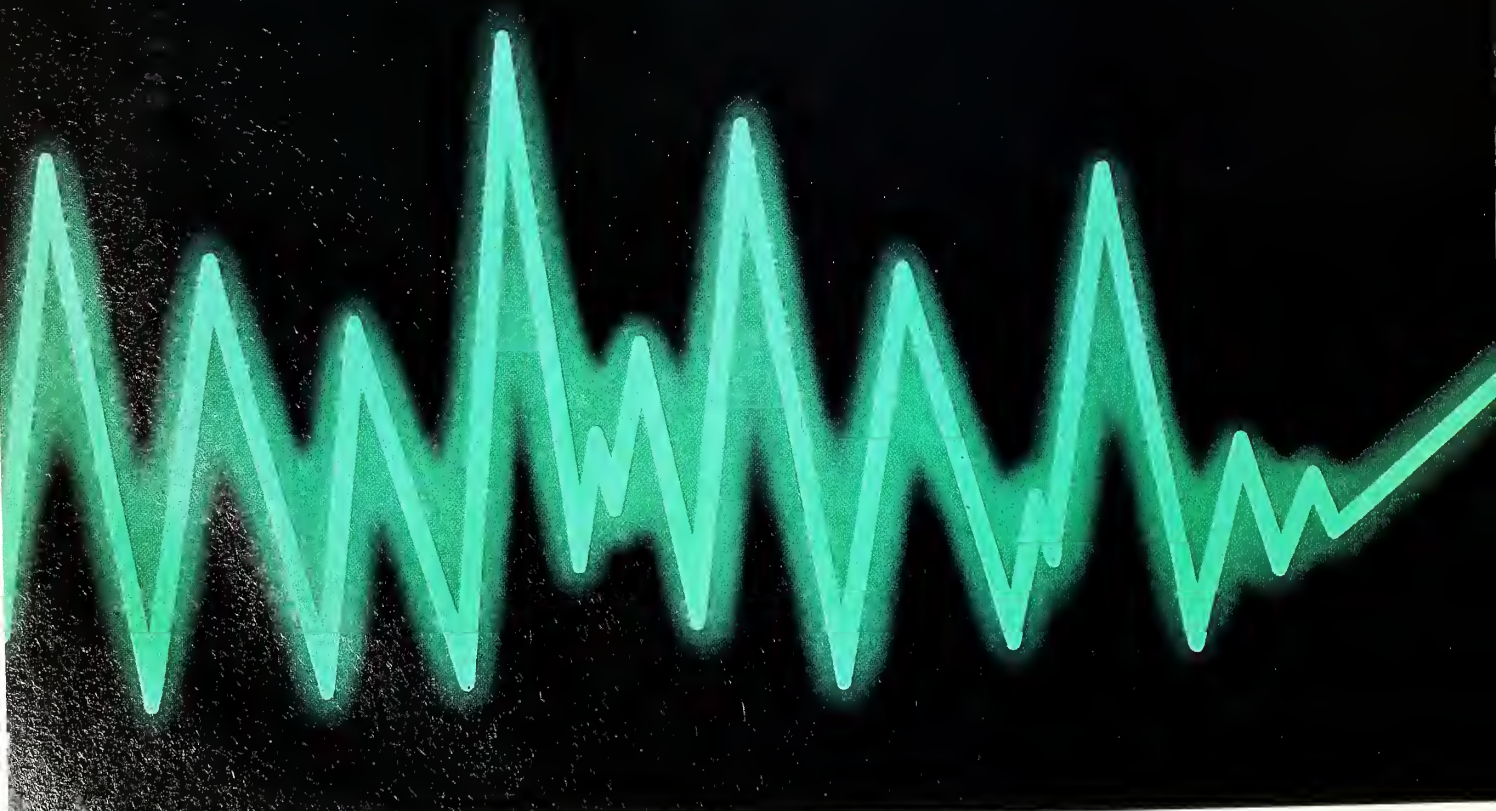
Consider a pharmacy with a total turnover of £150,000 and a pure profit of £8,000. To obtain a return on capital of 20 per cent we would stipulate a price of £40,000 for the entire assets including goodwill, stock, fixtures and fittings. If the stock were £20,000 and the fixtures etc £4,000, the sum for goodwill would be £16,000, that is twice the pure profit. But with a stock of £30,000 and fixtures etc of £6,000, only £4,000 would relate to goodwill, this being half a year's pure profit. The figures used in this example are for illustration only but they do suggest how the yield method could sometimes produce goodwill amounts likely to be unacceptable for opposing reasons to a vendor or to a purchaser.

Exceptional deviations

The comment made on the possible fallibility of the yield procedure does not prove that the method is without value.

Hedex. They'll see it on T.V.

You'll you



Over a large sample of pharmacies, stocks and fixtures etc will tend to reach a norm and enable us to detect the business with exceptional deviations. This business can then be given special consideration by a potential buyer to find out whether the problems can be satisfactorily dealt with.

A rational solution to the whole question of goodwill assessment would seem to be to employ both the methods described, that is to weigh-up the goodwill first by the "comparative" procedure and then check on the yield on capital. Where the figure for goodwill is in line with the overall market and it also shows a satisfactory *total* purchase price in relation to pure profit when stock and fixtures are added to it, both vendor and purchaser could be reasonably assured that the price is about correct.

There cannot be any absolutely "correct" valuation in the sense of a correct answer to a question in mathematics — the human factors involved are too complex for this.

Unusual cases

Final proof of the goodwill value of a pharmacy is what it fetches in the current

market. Extraordinary prices, high or low, spring mainly from one or more of three sources: 1 lack of market knowledge by buyer, seller, or both, 2 The existence of some peculiar relation of supply and demand affecting one buyer and one seller, 3 Some unusual quality of the pharmacy.

A vendor might own the one pharmacy of its type on, perhaps, a small offshore island. The market for such businesses is limited and the goodwill expected might be low. However there could be a pharmacist who has for many years longed, for some personal reasons, to exercise his profession in that kind of situation. The vendor has only a small market but the pharmacist with his eye on this island is aware that if he or she lets the chance slip away it might not recur for many years. Here we could have a psychological and commercial environment which could throw up an agreement on quite unforeseeable terms.

Or imagine the village with its single pharmacy coming on the market, and the position of a pharmacist apprenticed there and with a sentimental attachment to owner and district. What bargain would

be struck between apprentice-master and former apprentice, what balance would there be between finance and feeling?

As we shall see in the next article, instances of exceptional goodwill values can be multiplied. But these exceptions do not detract from the importance of market exploration and market information. Unless we make ourselves conversant with the average we are hardly able to detect and to cope with the out-of-the-ordinary. And the extraordinary proposition can be extraordinarily profitable and rewarding provided we are efficient in assessing the risk. Profit is a reflection of risk successfully borne: here at least economic theory will not mislead.

ee it in sales.

When customers complain of headache you know that Hedex will give them fast and powerful relief. Without upset stomach.

But did you know that Sterling Health is spending £525,000 on a brand new Hedex national TV campaign over the next three months?

Which means more people than ever will be looking for Hedex on your shelves. After all, it is the leading branded paracetamol.

So be ready with ample stocks of Hedex. And make sure you display those blue packs prominently.

Our new commercial with its striking "green line" dramatically underlines our "made for your headache" theme.

It's the sort of advertising that keeps us way ahead of the competition. And keeps those stocks moving off your shelves.

So order now and be ready with the relief headache sufferers want.



Sterling Health

Hedex is a registered trademark.

Dosage control catches up with modern drugs

With the launch of Osmosin, Merck Sharp & Dohme have, they say, "advanced the technology of oral drug delivery from that practised by the caveman to a level of sophistication on a par with the silicon chip".

The past year or so has seen a high degree of innovation from drug companies, not only in terms of new drug molecules, but in the way existing drugs are delivered to the patient.

Among the new dosage forms have been glyceryl trinitrate, presented as an adhesive patch for transdermal administration and as an oral spray; a diazepam solution for rectal administration, and a "floating" capsule of diazepam.

A recent meeting of the Pharmaceutical Society's Industrial Pharmacists Group discussed liquid-filled hard gelatin capsules, edible webs of paper or polymer with the drug distributed over the surface, and tissue-targeted microspheres. The last of these has been described by Professor Eric Tomlinson as a "magic gun" approach, targeting active molecules at a specific site, as opposed to Ehrlich's "magic bullet" approach, using active drug molecules which are receptor specific.

The latest development comes in the form of Osmosin, described by Merck Sharp & Dohme as the "osmotic tablet".

To put the development in context we can trace the evolution of oral dosing systems from the pill, invented in Ancient Egypt about 1552 BC, before which only solutions, suspension, elixirs or potions appear to have been used. The pill was the

first attempt to solve the problems of inconvenience, portability, unpalatability and inaccuracy of dosage inherent in these liquid forms.

About 2,500 years passed without any further advances. In Persia in AD900, the physician, Rhazes (AD 865-925) achieved something which classical Greek and Roman medicine had failed to do — he invented the pill coating. By coating pills with a vegetable substance, he went some way towards solving the problem of nauseous or bitter-tasting pills.

Almost 100 years later, another Persian physician, Avicenna (AD 980-1037), further beautified the pill by covering it with gold or silver leaf. In an age that believed in alchemy, precious metals were thought to enhance the effectiveness of the medication, in addition to increasing patient acceptability.

Depending on the consistency of the coating, however, the pills would have either totally disintegrated (often before being swallowed!) or passed through the patient like a bullet without releasing any of their active ingredients.

No advances

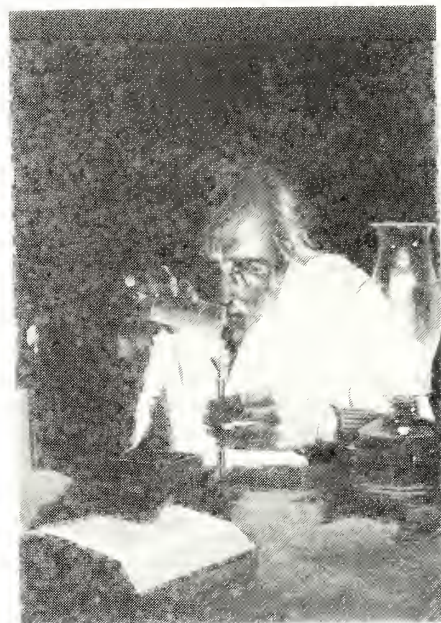
After 800 years in which no advances on the silver coated pill occurred, there was a sudden burst of innovation during the middle of the 19th century.

In 1834, the French pharmacist Mothes, and his collaborator, Dublanc, invented the soft gelatin capsule. For the first time, liquid medication could be given in a dose form as convenient to handle and carry as the traditional pill.

Since the gelatin capsule dissolves in the stomach releasing its drug contents, the major advantage of this invention was to ensure availability of all the drug for rapid absorption into the bloodstream.

However, a major failing of the soft gelatin capsules of 1834 was that they were extremely laborious to make and fill. This problem was overcome by James Murdoch of London in 1847 who invented the hard gelatin "telescopic" type of capsule most commonly used today.

Coating techniques advanced rapidly with the invention of sugar coating by two French pharmacists, Fortin and Labelonie



Filling gelatin capsules

(1837) who took their technique directly from the art of the confectioner.

From Press comment made at the time, it is apparent that physicians were not only trying to make life more pleasant for the patient but that they also realised that ensuring that the patient would take the medication (an early view of patient compliance?) could seriously influence the results of treatment.

All the above improvements on the pill of 1552 BC were, however, overshadowed by the invention of the tablet, the single greatest advance in oral dose form development in almost 3,400 years.

The Englishman, William Brockendon, neither a physician nor a pharmacist but a watchmaker, artist, author and inventor, took out a British patent for his tablet punch and die in 1843. He called his product a "compressed pill" because his specific objective was to produce a pill held together by compression; it required no inclusion of adhesives and thus avoided the problem of varying release of drugs from conventional pills.

The Americans, who were pioneers in mass manufacture, took the next step by inventing mass-produced tablets with sugar coating by compression, virtually a tablet within a tablet (Carter, 1878).

Despite the fact that tablets and capsules may be better than pills in terms of palatability, and assure release of drug in the gut, in terms of getting the right amount of drug into the bloodstream for the right length of time, they represent no advance on the ancient pill form.

Conventional tablets produce fluctuating blood levels, thus the time for which the plasma concentrations remain



Pill coating

Continued on page 76

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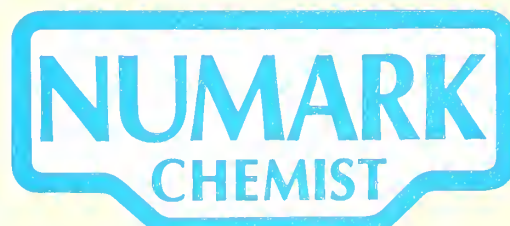
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A COMPREHENSIVE SERVICE TO THE INDEPENDENT CHEMIST.

Continued from page 74

No further advanced than the caveman

at the optimum level will be relatively short-lived, depending on drug elimination.

As Takeru Higuchi, vice-president of Merck Sharp & Dohme Research Laboratories has commented: "There certainly must be better approaches than the present practice of popping a capsule or tablet into the patient's mouth and expecting the right blood concentration (of drug) to be attained and maintained without exposing him to serious overdose or underdose — a level of drug delivery technology no further advanced than that practised by the caveman."

Ideally, medicines needed an oral system which could meter out a dependable steady amount of drug, avoiding both the sudden rush that threatens side effects and the sharp slide of concentration that lowers effectiveness.

The first attempts at controlling the release of a drug were to determine *where* it was released rather than *when*. In 1884 Unna in Germany devised a keratin tablet coating which would ensure that the drug was not released in the stomach but in the intestine, where most absorption takes place. These enteric coated tablets avoided the gastric problems associated with some drugs and protected drugs susceptible to attack by stomach acids.

Enteric coatings, although erratic in effectiveness for many years, opened the door to a whole new way of thinking. If a particular coating can affect *where* a drug is released in the body then other coatings,

dissolving after various time periods, could affect *when* it is released. Thus, in the 1950s we saw the first slow-release capsules containing a mixture of drug granules, each with different thicknesses of coating dissolving at different rates.

Efforts to achieve a dependable timed release of drugs from an oral capsule continued into the 1970s with a profusion of patents being granted. Although many sophisticated new materials have been designed to try to perfect this slow release capsule they are essentially extensions of the enteric coating concept of 100 years ago.

Why, after the burst of innovation in oral drug delivery technology in the second half of the 1800s, did this virtually halt in the present century? Possibly because research efforts of the past 80 years have been focused on the search for new drugs.

Although most of these drugs were developed over the past 20 or 30 years, the form in which they are taken is still based on age-old principles. Dr Higuchi has described today's tablet or capsule dosage as being "like shipping drugs from Basle to Rotterdam by pouring them into the Rhine". In 1974, he and Felix Theeuwes invented the osmotic pump.

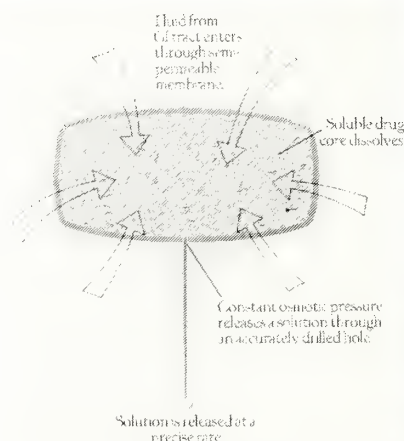
The osmotic pump

The oral osmotic pump, which forms the basis of Osmosin (data sheet information, C&D December 4, 1982, p1014), is a simple system that looks like a tablet but with a laser-drilled hole in it. The outer layer is cellulose, acting as a semi-permeable membrane containing a core of solid drug.

When the osmotic tablet is swallowed, water in the alimentary tract gradually passes through the membrane into the tablet core where it dissolves the drug. The pressure of this drug solution rises and it is released through the laser-drilled hole. The device pumps a volume of saturated solution of drug equal to the volume of solvent uptake in any given period. This pumping continues at a constant rate so long as there is solid drug in the core. Thus the drug is released in solution at a continuous, controlled rate, rather than dissolving rapidly in the stomach as in conventional tablets.

The system possesses some unique features, which at the present time have not been achieved with conventional rate-controlled delivery forms. These include: (1) *in vitro* delivery rate equal to *in vivo* delivery rate; (2) independence of delivery rate from pH or environmental agitation, and (3) close approximation of the delivery rate from the physicochemical properties of the system.

One of the major advantages is that *in vivo* drug release can be predicted from *in*



Cross section of Osmosin *vitro* test results.

The thickness of the membrane and the size of the hole can be adjusted to suit the characteristics of the drug to be incorporated in the system, so that the right amount of drug can be delivered continuously to the body from an oral dose that needs to be taken once — or sometimes twice — daily.

The osmotic tablet system therefore meets the dual criteria of controlled therapeutic effect and convenience to the patient — both essential in chronic diseases such as arthritis, heart disease, high blood pressure, diabetes and some forms of cancer, where patients are often required to take medication continuously for many years.

Two double-blind trials, involving 412 patients at different centres in the United States, have been conducted by Dr Andre Calin and Professor Arthur Bobrove. One study involved patients suffering from rheumatoid arthritis and the other osteoarthritic patients.

It was concluded from results of the trials that Osmosin is at least as effective as conventional indomethacin capsules in reducing pain and inflammation when administered once or twice daily. In addition, the incidence of gastrointestinal adverse experiences was significantly lower for Osmosin 7mg per hour than for the other active drug groups, and in some cases lower than placebo.

A paper in *Pharmacy International* (December, 1982) has described Osmosin as perhaps "the harbinger of a truly rational pharmacology and precise pharmaceutical engineering of oral dosage forms". It could also allow evaluation of a number of active agents "whose inefficient delivery has, until now, prevented realisation of their full therapeutic potential".

This article has been based mainly on papers and illustrations issued by Merck, Sharp & Dohme Ltd to support the UK launch of Osmosin.



Controlled release preparations

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OPERATIVE FROM JANUARY 17th, 1983

| Product | | Prod. Code No. | Rec.Fixed Retail Selling Price each incl. VAT | MBU Dozs. | Pts Value per MBU | Rec. Trade Price per doz. exc. VAT | Price per doz. (exc. VAT) relevant to the total points value of the complete order | | | | | |
|-------------------------------|------------|----------------|---|-----------|-------------------|------------------------------------|--|----------------|-----------------|------------------|---------------|------------|
| | | | | | | | Points 100 200 | Points 201 650 | Points 651 1500 | Points 1501 2000 | Points 2001 + | VAT Rate % |
| PROPRIETARY PRODUCTS | | | £ | | | Rate | 1 | 2 | 3 | 4 | 5 | |
| BENGERS FOOD METRIC PACK | 250G | 1670 | 0.95 | 6/12 | 3 | 9.19 | 8.73 | 8.50 | 8.36 | 8.27 | 8.04 | ZERO• |
| | 500G | 1690 | 1.60 | 3/12 | 3 | 15.25 | 14.49 | 14.11 | 13.88 | 13.72 | 13.34 | ZERO• |
| | 1KG | 1700 | 2.50 | 1/12 | 1 | 24.00 | 22.80 | 22.20 | 21.84 | 21.60 | 21.00 | ZERO• |
| *BILE BEANS | P MEDIUM | 1320 | 0.52 | 1 | 2 | 4.15 | 3.94 | 3.84 | 3.78 | 3.74 | 3.63 | 15• |
| | P FAMILY | 1330 | 0.99 | 6/12 | 2 | 7.39 | 7.02 | 6.84 | 6.72 | 6.65 | 6.47 | 15• |
| *COJENE TABLETS | PCDI 35 | 2240 | 0.99 | 1 | 5 | 7.59 | 7.21 | 7.02 | 6.91 | 6.83 | 6.64 | 15 |
| *CYSTOPURIN TABS | P 40 | 2320 | 0.85 | 1 | 4 | 7.16 | 6.80 | 6.62 | 6.52 | 6.44 | 6.26 | 15• |
| | P 80 | 2330 | 1.40 | 3/12 | 1 | 10.25 | 9.74 | 9.48 | 9.33 | 9.23 | 8.97 | 15• |
| *GENASPRIN TABS | P 100 | 2430 | 0.85 | 3/12 | 1 | 5.88 | 5.59 | 5.44 | 5.35 | 5.29 | 5.15 | 15 |
| GENISOL SHAMPOO | P 58ML | 3310 | 1.12 | 3/12 | 1 | 7.77 | 7.38 | 7.19 | 7.07 | 6.99 | 6.80 | 15 |
| | P 250ML | 3340 | 3.87 | 3/12 | 5 | 26.90 | 25.55 | 24.88 | 24.48 | 24.21 | 23.54 | 15 |
| | P 600ML | 3360 | 8.22 | 1/12 | 3 | 57.17 | 54.31 | 52.88 | 52.02 | 51.45 | 50.02 | 15 |
| *PARACODOL TABLETS | PCDI 10 | 5330 | 0.54 | 1 | 2 | 3.30 | 3.14 | 3.05 | 3.00 | 2.97 | 2.89 | 15• |
| ROSKENS HAND CONDITIONER | 45G | 7810 | 0.58 | 1 | 4 | 4.38 | 4.16 | 4.05 | 3.99 | 3.94 | 3.83 | 15 |
| | 100G | 7890 | 1.05 | 1 | 7 | 8.05 | 7.65 | 7.45 | 7.33 | 7.24 | 7.04 | 15 |
| *SANATOGEN LIQUID TONIC | P 200ML | 1400 | 1.45 | 1 | 7 | 10.38 | 9.86 | 9.60 | 9.45 | 9.34 | 9.08 | 15 |
| *SANATOGEN POWDER ORIGINAL | GSL 4 OZ | 1110 | 1.35 | 6/12 | 4 | 10.76 | 10.22 | 9.95 | 9.79 | 9.68 | 9.42 | 15• |
| | GSL 8 OZ | 1120 | 2.40 | 3/12 | 3 | 19.47 | 18.50 | 18.01 | 17.72 | 17.52 | 17.04 | 15• |
| | GSL 1 LB | 1130 | 4.10 | 1/12 | 2 | 34.16 | 32.45 | 31.60 | 31.09 | 30.74 | 29.89 | 15• |
| | GSL 2 LB | 1140 | 7.20 | 1/12 | 4 | 59.08 | 56.13 | 54.65 | 53.76 | 53.17 | 51.69 | 15• |
| *SANATOGEN MULTIVITAMINS | GSL 30 | 3600 | 1.30 | 1 | 6 | 9.36 | 8.89 | 8.66 | 8.52 | 8.42 | 8.19 | 15• |
| | GSL 60 | 3610 | 2.40 | 6/12 | 5 | 16.89 | 16.05 | 15.62 | 15.37 | 15.20 | 14.78 | 15• |
| | GSL 120 | 3620 | 3.90 | 3/12 | 4 | 27.44 | 26.07 | 25.38 | 24.97 | 24.70 | 24.01 | 15• |
| *SANATOGEN MULTIVITAMINS+IRON | GSL 30 | 3640 | 1.30 | 1 | 6 | 9.36 | 8.89 | 8.66 | 8.52 | 8.42 | 8.19 | 15• |
| | GSL 60 | 3650 | 2.40 | 6/12 | 5 | 16.89 | 16.05 | 15.62 | 15.37 | 15.20 | 14.78 | 15• |
| | GSL 120 | 3660 | 3.90 | 3/12 | 4 | 27.44 | 26.07 | 25.38 | 24.97 | 24.70 | 24.01 | 15• |
| *SANATOGEN JUNIOR VITAMINS | GSL 30 | 3680 | 0.85 | 1 | 4 | 5.79 | 5.50 | 5.36 | 5.27 | 5.21 | 5.07 | 15• |
| | GSL 100 | 3690 | 1.98 | 3/12 | 2 | 13.83 | 13.14 | 12.79 | 12.59 | 12.45 | 12.10 | 15• |
| SANATOGEN VITAMIN B+HONEY | GSL 60 | 3590 | 1.05 | 1 | 5 | 7.20 | 6.84 | 6.66 | 6.55 | 6.48 | 6.30 | 15 |
| SANATOGEN VITAMIN C TABLETS | 30 | 3710 | 0.78 | 1 | 3 | 5.16 | 4.90 | 4.77 | 4.70 | 4.64 | 4.52 | 15• |
| | 100 | 3720 | 1.90 | 3/12 | 2 | 13.09 | 12.44 | 12.11 | 11.91 | 11.78 | 11.45 | 15• |
| SANATOGEN VITAMIN E TABLETS | 30 | 1900 | 1.20 | 1 | 6 | 8.87 | 8.43 | 8.20 | 8.07 | 7.98 | 7.76 | 15• |
| SANATOGEN HIGH C | 10 | 2020 | 0.72 | 10/12 | 5 | 5.47 | 5.20 | 5.06 | 4.98 | 4.92 | 4.79 | 15• |
| *ZAM-BUK OINTMENT | GSL MEDIUM | 1520 | 0.55 | 1 | 2 | 3.96 | 3.76 | 3.66 | 3.60 | 3.56 | 3.46 | 15• |
| VAPEX INHALANT | GSL 14ml | 8000 | 0.64 | 1 | 4 | 4.52 | 4.29 | 4.18 | 4.11 | 4.07 | 3.96 | 15 |

ABBREVIATIONS USED IN THIS PRICE LIST

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NOTE — Products not categorised as above are not medicinal products
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PSGB STATUTORY COMMITTEE

Planning applications false says Council — judgment reserved

The director of six Midland pharmacy companies was accused at the December hearing of the Pharmaceutical Society Statutory Committee of misleading two local councils by making false planning applications. Mr Frederick Ford of Birchlea House, West Leake Road, East Leake, Loughborough, appeared to answer complaints by the Society's Council.

It was alleged that he personally, or through an agent, an Oadby architect, used the name of one of his pharmacists without his knowledge or consent on applications to change the use of two residential properties in Newark and Loughborough to doctors' surgeries.

False use stated

The Council claimed the application falsely stated that Mr Paul Jepson, a doctor of philosophy and a bachelor of pharmacy, was a registered medical practitioner, and that the premises were to be used as medical surgeries. The applications, which concerned premises in London Road, Newark, and Bridge Street, Loughborough, were made between May 1 and December 31, 1980. Planning permission was granted for the first and limited permission for the second.

Mr Josselyn Hill, for the Council, said the application has a medical connotation and it was alleged the use of the prefix doctor must have led the authorities, Charnwood Council and Newark Council, to believe a medical doctor was the applicant. Mr Ford's name did not appear on the application documents and there was no dispute that he did not want his name to appear. Mr Hill said it was conduct which was likely to bring the pharmacy profession into disrepute.

No instructions issued

Mr Jepson, of Ember Lane, Bonsall, near Matlock told the Committee he had never instructed anyone to make planning applications on his behalf, nor had he consented to his name being used. He said there was a conversation between him and Mr Ford in August 1979 about him possibly becoming a shareholder and director in Mr Ford's companies. But subsequently he turned down Mr Ford's offer.

In the mid-seventies Mr Ford and the other directors decided to use different names on planning applications — the names of new shareholders or directors, or the name of a new company itself.

Mr Ford said he was advised by Mr Crawford on the architectural and planning side and it was Mr Crawford who did all the documentation. He was advised that if he established one use under Class 15 of the Planning Regulations that would then cover any use under that class. He had not seen any of the applications himself. Mr Crawford filled in the forms.

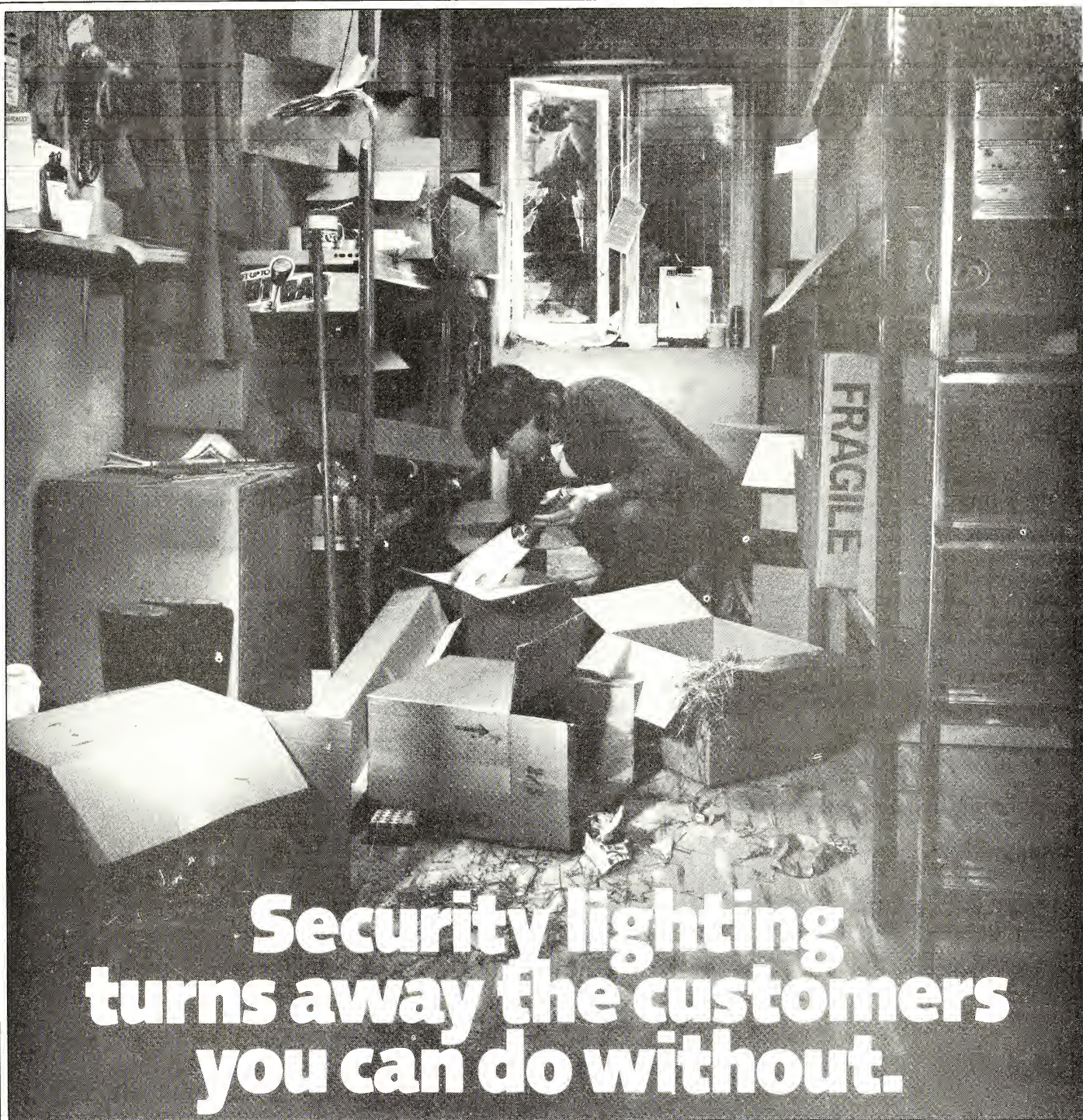
He said the name of Mr Jepson was used as a result of the conversation they had about the possibility of a directorship.

Mr Ford said he knew that Mr Crawford would be applying for a surgery, and he knew that Mr Crawford was going to use Mr Jepson's name. But he did not know that he was going to use the prefix "doctor." Mr Ford said he accepted responsibility for what Mr Crawford did.

The committee reserved its judgment until January 25. C&D will report on the future proceedings.

More Statutory Committee on p80

Chemist & Druggist 15 January 1983



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Illegal trading

A North London pharmacist was reprimanded by the Pharmaceutical Society's Statutory Committee recently for selling medicines from unregistered premises. Mr James Martin, of Whitehouse Way, Southgate, was accused of failing to pay the registration fee due to the Society for his shop in Holloway Road, N7 last year.

The Society's Council complained to the Committee following Mr Martin's appearance at Highbury Corner Magistrates Court in January this year when he pleaded guilty to two offences under the Medicines Act, and was fined £50 on each offence and ordered to pay £100 costs. The Committee was told that one offence concerned the sale of Gee's linctus, and the other the supply of Benylin expectorant on prescription. Neither the sale nor the supply were made from registered premises (71 similar offences were taken into consideration).

Mr Josselyn Hill, for the Society, said that Mr Martin received a letter from the Society in June 1981 warning him that his premises were no longer on the Register because he had not paid the fee. In 1975, 1978 and 1979 he also failed to pay for his premises to be registered and they were removed until he paid. In 1978 he also did

not pay his own personal registration fee and his name was removed.

In July last year, the Society's local inspector went to the Holloway Road shop with the chief inspector who had previously checked that the premises were no longer registered. They made a test purchase of some Gee's linctus. Mr Hill said that Mr Martin maintained that he had sent a cheque for the premises fees on the previous day, but on further investigation this was found to be untrue.

This dispensing of prescriptions was discovered and because the premises were not registered this dispensing was illegal. The 71 matters taken into consideration related to the dispensing of 34 NHS prescriptions and 11 private prescriptions. Some of them for more than one item, between July 9-15.

Mr Hill said that Mr Martin ceased trading at Holloway Road at the end of October last year but opened another pharmacy in Victoria in May this year. He had paid this year's fees. Mr Martin told the Committee that he had been a pharmacist since 1957 and acquired the Holloway Road shop in 1974. But running it had not been easy and he last had a holiday in 1974.

His fees were supposed to be paid by a Mr Bowen, a friend and fellow pharmacist. He had been the superintendent pharmacist of Mr Bowen's company, Epps Thatcher, since March 1976. He did not receive a salary but Mr

Bowen agreed to pay his fees. When he received the letter from the Society in June last year warning that the premises had been removed he telephoned Mr Bowen who said he would see to it.

He knew he was trading illegally but when the Society telephoned him to say that the fee had not been paid he still carried on trading. In future, he would pay his own fees and reclaim from Mr Bowen. Mr David Reissner, for Mr Martin, said that he accepted personal responsibility for the non-registration of the premises and that he might perhaps have done more to ensure that the fees were ultimately paid.

Mr Bowen had written to the Society saying that there had been a breakdown in communication between Mr Martin and his (Bowen's) secretary. Mr Martin had inquired whether his personal and premises fees had been paid and he was told by her that they had. But only his personal retention fee had been paid. Mr Martin was of exemplary character but his business had suffered many setbacks.

The Committee's chairman, Sir Carl Aarvold, said Mr Martin seemed to have treated the failure to pay the fees with a certain amount of contempt. Persistent failure to pay fees could well cause the Committee to strike his name from the Register. Sir Carl added: "This applies not only to Mr Martin but to all other pharmacists who might be dilatory in paying their proper fees."

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LETTERS

Computer 'holiday'

I am the organiser of a "computer holiday" for pharmacists which is due to take place at the University of Southampton on the week commencing March 21, and I am writing to ask for your readers' help.

We aim to provide a programme which will:- (1) Help retail and hospital pharmacists to identify the scope for using a computer; (2) critically review the commercial computer "packages" currently being marketed as being suitable for the chemist; (3) develop the pharmacist's skill and knowledge of computers and programing so that if he wishes he can develop and write his own programs.

It is in relation to objective (2) that I am particularly seeking assistance through your columns. I will be very grateful for any information readers can provide regarding their experiences with computers or computer packages, either those they have bought commercially or developed themselves.

With so many computer salesmen around it seems highly likely that some retail chemists will be misled into making expensive mistakes. The best way to reduce this likelihood is to provide everyone with as much unbiased and objective information as possible.

If anyone cares to write to me on the subject of computers for retail chemists I should be very pleased to hear from them.
Dr Lionel Wardle,
37 University Road,
Highfield,
Southampton SO2 1TH.

Returnable bottles

I note with interest that Beecham have recently introduced a 1 litre size of Lucozade, packed in a non-returnable bottle.

In view of the inevitable confusion between the new size and the traditional 26oz returnable bottle, surely now a move could be made to pack all Lucozade sizes in non-returnable bottles.

This would have the double benefit of reducing the price at point of sale, while also stopping the sheer inconvenience to shopkeepers of handling each bottle twice. I also wonder if the costs to wholesalers, and to Beechams themselves, in administering the whole returnable bottle system with its attendant credit notes, makes it worthwhile.

With the introduction of bottle banks in many areas much of the environmental nuisance associated with non-returnable bottles can be eliminated, so it would be

interesting to hear from Beecham if any advantages now remain with the returnable bottle system.

A. Walmsley,
Stonehouse, Glos.

A spokesman for Beecham Foods replies:

"It is not intended to discontinue either the 26oz or 1 litre size in the foreseeable future. The litre size was introduced to meet a requirement from the larger stores, whereas the 26oz returnable bottle meets the requirements of our traditional trade — where it has been found that four out five consumers returning empty Lucozade bottles buy new ones. Introduction of the litre size has resulted in a most acceptable increase in overall Lucozade sales."

Xrayser's error

I take very strong exception to Xrayser's remarks in *C&D* January 8, since he is absolutely wrong in his presumptions. At the time of October 3, 1982, when the RPA held its meeting on patient option forms, and when it was mooted that the RPA was considering (no more of that) a possible injunction, only five LPCs had become associate members.

One of these became a member on September 30 and must, therefore, have been aware of the position that the RPA was taking. It follows that 19 of the 23 LPCs who have become associate members were fully aware of the stand that the RPA has taken and it would appear that they have, by becoming associate members, approved of the action and work the RPA is doing.

To presume, quite wrongly, that LPCs should feel "as sick as parrots" is not only grossly insulting to the integrity of the RPA but also maligns the LPCs, all 93 of which have been contacted and all of which would have debated the pros and cons of becoming associate members. And to infer that the 20 innocent associate members are incapable of allocating funds for which they are responsible is scandalous.

Xrayser finally has the nerve to assume that he is closer to the RPA than we may think. Thank you very much Mr Xrayser, I would prefer the clout of an enemy rather than the handshake of such a friend.

J. Davies,
Secretary,
Rural Pharmacists Association,
Wiveliscombe, Somerset.

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Opticians profits not 'excessive' but prices could be reduced

The rules on publicity which debar opticians from advertising have led to higher prices for spectacles, and lower efficiency than would otherwise have been the case.

A report from the Office of Fair Trading, published last week, says that opticians' profits in recent years have not been excessive, but the falling profitability of NHS work has been partially compensated for by increased charges for private work.

The report was called for over a year ago by the Government because of concern over the high price of glasses. However new NHS fees in 1982 mean that private spectacle prices could be reduced significantly without any reduction in overall profits, says the report.

Unregistered sellers

Possibly the most controversial suggestion in the report is if restrictions on selling were lifted, unregistered sellers would be able to enter the market to compete with opticians. Under Section 21 of the Opticians Act 1958 only registered opticians or a doctor may sell optical appliances. The OFT report says a minority of the public would choose to purchase spectacles, particularly reading glasses, from unregistered sellers and without having a sight test.

Estimates of the market share which non-opticians might attain vary, but could fall in the range of 3-5 per cent — the

equivalent of 250,000 to 400,000 pairs of spectacles a year. The spectacles could be available at prices significantly below those charged by opticians, the report says.

The Association of Optical Practitioners is against unregistered sales of spectacles. Mr R. Highton, deputy secretary, says: "There are inherent dangers in bypassing an eye examination." While agreeing that many people would require only simple adjustment, he points out that it is at this stage that glaucoma often becomes apparent.

Current rules

The General Optical Council is empowered under Section 25 of the Opticians Act to make rules governing publicity. Current rules, dating from May 1981, allow only such publicity as listing in the Yellow Pages, material sent to existing patients, and some publicity in practice premises. The report finds that the restriction on competition resulting from advertising restrictions leads to wider spread of prices for the same prescription than would otherwise be expected. This was confirmed in a price survey conducted by the Consumer's Association for the review. The publicity rules effectively deny consumers information on the range and prices available, but also on location of opticians, services offered, any product

privatisation is the co-operation of the top administrators. It's blood money, that's all it is."

If the proposal is accepted it could mean a total increase of £3,756 a year for the top jobs.

Chemists corner disposables market

Over 70 per cent of disposable nappies are sold through chemists with Boots accounting for 50 per cent of disposables sales, says a recent report in *Retail Business*.

Market value for 1981 is estimated at £65m, with the high level of growth a reflection of the level of activity of manufacturers. However, the UK is still at the bottom of the European league with only 18 per cent of consumers using disposable nappies in 1981.

Biggest UK manufacturer is Colgate Palmolive with Curly Snugglers, the

guarantees and specialised services.

Mr Highton says he would welcome being able to inform the public of the opening of new practices but adds: "There is a tremendous number of red herrings regarding variation in price. Up to May 1981 opticians were able to put the prices of frames in windows." However any changes in advertising policy are a matter for the two professional bodies — the General Optical Council and the General Medical Council.

Costs and profits

A survey of opticians' costs and profits carried out as part of the report shows pre-tax profits per optician are around £12,000 to £14,000. These profits do not seem excessive, the report says. NHS fees remained almost unchanged between 1978 and 1981 and this led to a fall in gross profit on NHS dispensing from 39 to 29 per cent — profits on private dispensing rose from 55 to 57 per cent. The report suggests that the new NHS fees could permit prices to fall by 15 per cent without any fall in profit.

"There have been reductions in many practices in the past year. I think when the new NHS fees get into the system there will be another reduction," says Mr Highton.

Opticians and Competition: a report by the Director General of Fair Trading on Sections 21 and 25 of the Opticians Act 1958. HMSO, (£5.75).

□ Opticians are usually good businessmen and the idea of a co-operative wholesaler should appeal to them, says Mr Peter Dodd, managing director of Unichem. Writing in the influential American magazine *Leaders* he suggests that any small retail outlet — including hardware shops and newsagents — could benefit from a well-run co-operative. The article traces the 140-year history of co-operatives in Britain and Europe.

report says, followed by Robinsons of Chesterfield with the Paddi range, and Peaudouce.

Large amounts are spent on advertising due to the market potential, the most heavily advertised brand being Pampers. Advertising will continue at a high level, and the grocery sector will continue to expand, bringing widespread price cutting and a reduction in margins, the report concludes.

Patients to be involved?

The Royal College of General Practitioners is to set up a liaison group to involve patients in administrative and academic policies, according to a report in *The Times* this week.

The move will allow more discussion between patients and their doctors, as well as involving patients in decisions about treatment.

Health unions angry over extra pay offer

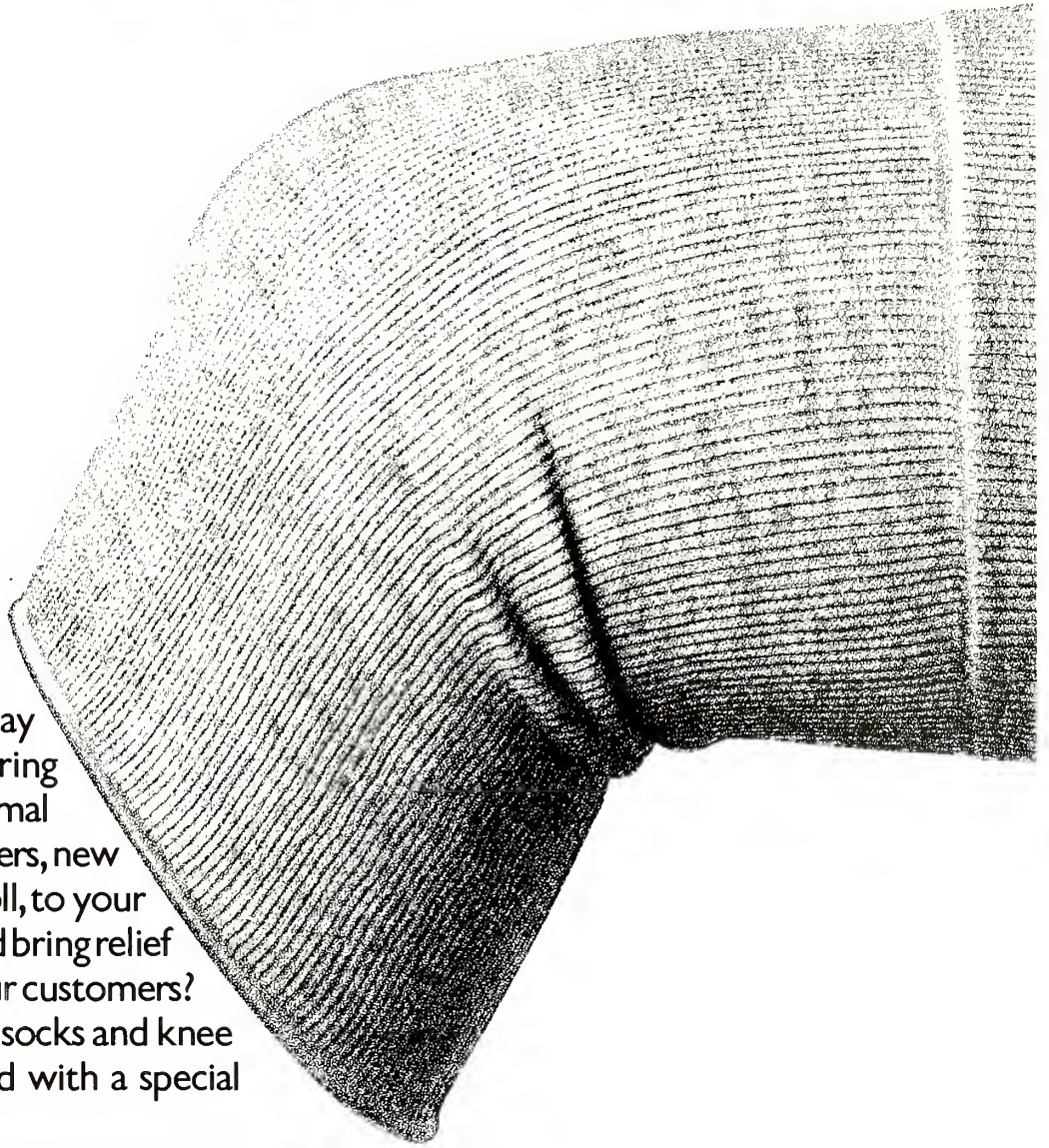
An extra pay offer to the top 500 administrators in the National Health Service in a differential settlement has angered the unions and may re-open the NHS pay dispute.

The new proposal within the 6 per cent plus 4.5 per cent formula which settled the dispute is to pay the clerical and administrative staff a 6 per cent plus 4.4 per cent salary increase. The remaining 0.1 per cent would be spread among the top administrators.

The unions oppose the differential element of the proposal and are pressing for flat rate increases of 6 per cent and 4.5 per cent for all.

A National Union of Public Employees spokesman told *C&D*: "The Government is trying to buy these guys off so they will privatise the NHS next year. One of the prerequisites for

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Hoechst UK negotiate to sell Optrex

Hoechst UK Ltd are currently in negotiations with a number of major companies regarding the possible sale of their Optrex subsidiary. Likely contenders are thought to include Beechams, Richardson Vicks, Sterling Health, Boots and Warner-Lambert. A management buy out also remains possible.

Managing director of Hoechst UK, Dominic Von Winterfeldt, describes the

situation as "in a state of flux". He also points out that the negotiations do not necessarily imply a change of policy for Hoechst, as it is not yet known who will buy Optrex, or on what terms a deal may eventually be struck. Hoechst claim in an official statement that initial approaches concerning the sale came from potential buyers.

Staff cutbacks for retailers continue

Unemployment in retailing will continue to increase in the New Year, according to a recent survey of leading employers in the sector conducted by Manpower Ltd. Staff cutbacks in the first quarter of 1983 are anticipated by 32 per cent of employers, while only 7 per cent expect to increase

staff. This compares almost exactly with the first quarter of 1982.

Another recent Manpower survey shows 38 per cent of retail employers as believing 1983 pay rises in their sector will be lower than in 1982, with only 10 per cent expecting a higher level. The majority of respondents thought pay settlements would average out at between 4 and 6 per cent during the coming year. *Manpower Ltd, Manpower House, 270 High Street, Slough, Berks SL1 1LJ.*

Costs cause lower profit at Wellcome

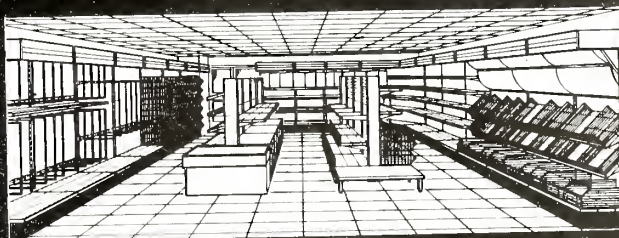
Wellcome Foundation Ltd increased turnover by 19 per cent to £595.5m in the full year to August 28, 1982. Pre-tax profit rose by only 10 per cent however, reaching £55.1m — a discrepancy which group chairman Alfred Shepperd blames on pressure of increased costs during the year. UK sales accounted for some £83m of total, while UK exports reached a new record at £123.4m (£116.3m). Capital expenditure during the year was £41m, of which £17m went to the UK.

Research and development spending amounted to £66.3m, equivalent to 11 per cent of total sales. Activity during the year included a US launch for antiviral Zovirax, which has "a unique type of action" against herpes viruses. The drug will be launched in other national markets over the next few years.

The new neuromuscular blocking agent, Tracrium, was launched last week, and marketing plans for antidepressant Wellbutrin and Flolan (prostaglandin) are said to be well advanced. Ceftizoxime, a third generation cephalosporin, has been licensed from Fujisawa, giving Wellcome marketing rights in the UK.

The past year also saw the formation of Wellcome Biotechnology Ltd.

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Macarthy's Truro depot not viable

Macarthy's are closing down their Truro ethical depot at the end of February when they will supply customers from their Plymouth branch with both OTCs and ethical. Over 20 staff are likely to be made redundant at Truro.

Truro customers heard the news this week, less than a year after Macarthy's purchased the depot from Sangers (*C&D*, March 6, 1982, p388). Managing director David Wright told *C&D* he was very sad about the redundancies but some drivers would be kept on to provide the twice daily service from Plymouth. "We have reorganised Plymouth and can offer a first class service from there."

Mr Wright said a small depot in a location such as Truro was not really viable bearing in mind discount levels given at present. Macarthy will try to sell off the lease of the building to a third party for an alternative use.

Jobs go at Max Factor

In an effort to "align costs with revenues" Max Factor Ltd have instituted a job reduction plan across all areas of their UK operations. Just over 100 staff have already left the company, or will be doing so in the next few weeks. Over 90 per cent of this reduction has been achieved by means of voluntary redundancies and early retirement, however, and no further staff cuts are currently planned.

Nimslo no longer with Timex

Shipments of the Nimslo 3-D camera to Europe from the Ricoh and Sunpak manufacturing companies in Japan have been brought forward to March.

The company recently terminated its production agreement with the Timex factory in Dundee and this week announced an agreement with Fralsen, a French company, giving it distribution rights for the amateur model in France and Belgium. The Fralsen agreement is subject to ratification by their board.

BOC suffer in USA

BOC group have managed pre-tax profits of £102.6m in the year ended September 30, an increase of 7.9 per cent on the equivalent figure last year. Sales rose by less than 1 per cent to £1,534.2m.

The group has seen increasing economic deterioration in most of its major markets over the past year, particularly in the USA which accounts



This Haliborange Sunshine coach was presented by Farley Health Product's sales manager, Richard Heaney (right), and Variety Club international ambassador Tom Eggerdon, to the Barley Lane special school in Exeter. A second coach was presented to Dean Hall School, Coleford, Gloucestershire.

for half total sales. Results for Europe as a whole are said to have improved substantially. This is attributed mainly to productivity improvements in the UK.

Redundancy pay

The limit on the amount of a week's pay used for calculating redundancy payments, some unfair dismissal awards and insolvency payments under the Employment Protection (Consolidation)

APPOINTMENTS

Counter-prescribing move by Janssen

Janssen Pharmaceutical Ltd have appointed Alan Hicks project manager for OTC medicines, heralding the company's planned expansion into counter prescription. Janssen will concentrate on "high quality Pharmacy only preparations which the pharmacist can prescribe with confidence".

Attractive margins and a range of bonus deals are also promised. Stugeron travel sickness preparations and Brentan miconazole cream will be among the first products to appear under the new Janssen livery. The company's programme will also include teach-ins for pharmacists and senior dispensing assistants.



Ex Sangers MD joins LRC Products

Nick Hodges, formerly managing director of Sangers Agencies, has been appointed

Act 1978 will be raised from £135 to £140 from February 1, 1983, under Orders laid before Parliament.

It is proposed that the limit on the compensatory award for unfair dismissal, sex and racial discrimination will go up from £7,000 to £7,500. The limit on the statutory guarantee payment to workers on short time or temporary lay-off will also be increased from £9.15 to £9.50 a day. The Orders are subject to the approval of both Houses of Parliament.

Briefly...

■ **Banfi Ltd** have changed their address to PO Box 25W, 37A Duke Street, London S1A 2JW.

■ **A. H. Robins & Co Ltd** are to spend £500,000 on refurbishing a research centre at Langhurst, near Horsham.

■ **S & W Berisford** have launched a new subsidiary, to be known as Berisford Chemicals Ltd. The new company will trade initially in speciality chemicals, but there are plans to expand its operations into other areas in due course. Dr J. B. Warren becomes managing director of Berisford Chemicals, and will be based at *Berisford House, King Street, Middlewich, Cheshire (tel 060 684 4721)*.

UK sales director for LRC Products. Here he will take responsibility for the company's retail, industrial and hospital sales teams. Prior to his tenure at Sangers, Mr Hodges was sales director with Johnson & Johnson's consumer products division. He has also held marketing and sales management positions with Kimberly-Clark and Golden Wonder.

■ Mr Ivan Lester, MPS, has been elected vice-chairman of the new **Harrogate Health Authority**, of which he has been a member since April 1982. He was previously a member of the Leeds Area Health Authority.

■ **Barclay & Sons Ltd**: Mr C. Ferris has been appointed financial director. He was previously chief accountant with the company. Following the resignation of Mr James Canning, MPS, as chairman, managing director Mr M. J. W. Hennessy will report direct to the main board. Mr Canning now becomes a consultant to Barclays, and will continue to represent the company on the various pharmaceutical trade associations to which it belongs.

■ **Glaxo Group**: Dr J.C. Hamlet has been appointed managing director of Glaxo Pharmaceuticals Ltd. He succeeds Mr E.R.C. Farmer, a member of the Glaxo Holdings plc board, who becomes chairman of Glaxo Pharmaceuticals Ltd, and a number of other Glaxo UK subsidiaries including Evans Medical Ltd, Farley Health Products Ltd, Glaxo Animal Health Ltd, and Vestric Ltd. Dr G.J. Blaker has been appointed technical director of Glaxo Pharmaceuticals in succession to Dr Hamlet.

Appointments

Continued from overleaf

■ **Regent Laboratories Ltd:** James Cameron is appointed marketing manager. In this post he will also take marketing responsibility for the activities of Wigglesworth (1982) Ltd.

■ **Elizabeth Arden:** Mr Joseph Dewey has been appointed director of sales and marketing. He joined Arden in 1972 and most recently was national sales manager, Elizabeth Arden of Canada Ltd.

■ **Arthur H. Cox & Co Ltd:** Colin Fearon has been appointed group sales manager taking control of both generic and ethical sales teams. Bob Unstead becomes sales service manager, and Janet Turner marketing information officer.

■ **International Chemical Co Ltd:** Mr Eric McGregor is appointed deputy managing director, in which post he will assume responsibility for the day-to-day running of the company. Mr McGregor joined in 1970 as marketing director. John Vale becomes sales and marketing director; he was previously sales director.

■ **North West Thames Regional Health Authority:** Mr Vic Flintham has been appointed regional personnel officer. He was the regional reorganisation co-ordinator for the last three years, and replaces Mr Will Armour who joins the newly formed Blood Products Special Health Authority in Elstree as secretary and chief financial officer.

COMING EVENTS

NW and Mersey Region conference

A conference for pharmacist contractors in the North West and Mersey regions will be held at the Lord Daresbury Hotel, near the M56 at Warrington, on May 8.

Senior officers from the Pharmaceutical Services Negotiating Committee and other speakers will answer queries and take part in the general debate. Further details will be circulated shortly. Arrangements are by Mr David Billington, PSNC Mersey Region (telephone Formby 77962) and Mel Wood, PSNC NW (telephone 061-736 1258).

FIP Congress

The 43rd Congress of the International Pharmaceutical Federation is to take place in Montreux, Switzerland, September 5-9.

Subjects covered will include a survey of Swiss pharmacy, and pharmacy in the Third World. There will be the usual sectional meetings, poster sessions, update lectures and symposia, as well as an extensive social programme. Details of registration and accommodation from the *Secretariat, FIP Congress 1983, Alexanderstraat 11, 2514 JL The Hague, Netherlands (telephone 070 631925).*

History Congress

The International Congress for the History of Pharmacy is taking place this year in Washington DC, USA, September 21-25. Organised by the American Institute for the History of Pharmacy, the Congress will be held at the Capital Hilton Hotel, 16th & K Streets, NW, Washington DC 20036. Registration fees are US\$150 (\$180 after August 1) for pharmacists, and \$100 for accompanying persons (\$125 after August 1). Details from *Secretary General, 1983 ICHP, 2215 Constitution Avenue, NW, Washington, USA.*

Vestric speakers

The development of pharmacy and distribution systems in the USA, pharmacy business in France, and opportunities in the British market, are among the topics for presentation at the Vestric convention in Paris in March.

Speakers will be Mr Robert Wakin, vice-president of sales and drug distribution for the Bergen Brunswick Corporation of America, Mr M. Berretti of Ile de France Pharmaceutique, and Mr John Cross, managing director of Intercontinental Medical Statistics in the UK. Places are still available for Vantage members.

■ Contrary to the information appearing in the Exhibitions and Trade Fairs column (C&D last week, p34), Helfex is not taking place this year, but next year, April 8-10, at Brighton.

Monday, January 17

Mid-Glamorgan East Branch, Pharmaceutical Society, White Hart Hotel, Pontypridd, at 8pm. Mr B.W. Burt on "Adverse drug reactions in general practice pharmacy." Buffet supper.

North Metropolitan Branch, Pharmaceutical Society, Coram lecture theatre, School of Pharmacy, Brunswick Square, at 8pm. Mr A. Trotman, managing director, ICML, on "Modern merchandising and the professional image." Joint meeting with NPA.

Tuesday, January 18

Fife Branch, Pharmaceutical Society, Anthony's Hotel, Kirkcaldy, at 7.45pm. Dr D. Doyle, medical director, St Columba's Hospice, Edinburgh, on "Pain control in advanced cancer."

Manx Chemists' Association, Postgraduate medical centre, Nobles Hospital, Douglas, at 8pm. Mr M. Gellman, chairman, NPA, on "Are you getting enough?"

Northumbrian Branch, Pharmaceutical Society, Viscount suite, Imperial Hotel, Jesmond Road, Newcastle, at 7.30pm. Professor D.N. Walder, professor of surgical science, department of surgery, Royal Victoria Infirmary, on "Some medical problems of deep sea diving."

West Middlesex Branch, National Pharmaceutical Association, Postgraduate medical centre, Ealing Hospital, Uxbridge Road, Southall, Middlesex, at 8pm. Mr W.A.G. Kneale on "Community pharmacy in Europe."

South East London Branch, National Pharmaceutical Association, Day Centre, Queen Mary's Hospital, Sidcup, Kent, at 8pm. Mr L. Priest, member of the Board, on "Prescription pricing."

Wednesday, January 19

Buckinghamshire Branch, Pharmaceutical Society, White Swan, Walton Street, Aylesbury, at 8pm. Speaker from Wellcome Foundation on "Acyclovir — new anti-viral drug."

Hull Pharmacists' Association, Postgraduate centre, Hull Royal Infirmary, at 7pm. Mr R.L. Hughes on "Information technology in pharmacy (computers, drugs and patients)."

Plymouth Branch, Pharmaceutical Society, Belvedere Lodge, at 8pm. Dr R.H. Seville on "The Management of psoriasis in general practice."

Thursday, January 20

Ayrshire Branch, Pharmaceutical Society, Balgath Hotel, Dunure Road, Ayr, at 8pm. May & Baker film "The Keys to paradise."

Bedfordshire Branch, Pharmaceutical Society, Bird-in-Hand, Henlow Camp Crossroads, at 8pm. Dr T.M. Cook on "Homeopathy — a growing concern." Film and lecture.

Bradford and Halifax Branch, National Pharmaceutical Association, Victoria Hotel, Bridge Street, Bradford, at 8pm. Mr John Hart, manager, Pharmacy Mutual Insurance Co Ltd, on "What PMI can do for you."

Bristol Branch, Pharmaceutical Society, Southmead Hospital Postgraduate medical centre, at 7.30pm. Mr D.N. Sharpe, member of Council, on "Can pharmacy survive the 20th Century?"

Dundee and Eastern Scotland Branch, Lecture theatre 3, Ninewells Medical School, at 7.30pm. Mr B. Kirkwood on "The College of Pharmacy Practice."

Leeds Branch, Pharmaceutical Society, Golden Lion Hotel, at 8pm. Mr W.A.G. Kneale EEC liaison secretary, NPA, on "Why get excited about the EEC?" Joint meeting with NPA.

Southend Branch, Pharmaceutical Society, Basildon Hospital Postgraduate medical centre, at 7.30pm. Lecture on "Recent advances in insulin therapy."

Advance information

School of Pharmacy, Brunswick Square, London, February 14 at 5.30pm. Special lecture by Professor H. Wagner, Institute of Pharmaceutical Biology, University of Munich, on "Immunostimulants from fungi and higher plants."

Royal Society of Health, 13 Grosvenor Place, London SW1, March 8 at 7pm. Dr Ellen Grant, clinical ecologist in private practice, on "The pill — do we understand its dangers?" Registration fee of £2.50 to non-members.

National Association of Women Pharmacists, Birmingham, April 8-10. Proposed annual weekend school. If interested contact Christine Glover, 36 Garvock Hill, Dumfermline, Fife.

Guild of Hospital Pharmacists, Bonnington Hotel, 92 Southampton Row, London WC1, at 7pm January 28. Presentation of the Nicholas Award. Buffet.

Effective branding and marketing of pharmaceutical products. All-day seminar, London Press Centre, London EC4, February 15. Cost £143.75 per delegate. Details from Macfarlane Conferences Ltd, 156 Oxford Street, London W1.

NPA training courses, Mallinson House, 40-42 St Peter's Street, St Albans, Herts. February 9-10, at 10am. Mr D. Freestone and Mr K. Hersey on "Profit from stock control and merchandising." Course fee £92 (exc accommodation). February 24, at 10am. Mr B.H. Gent on "Surgical hosiery and foot care training course." Course fee £22. March 2 or March 3, at 9.15am. Mr E.J. Downing on "Computers in the pharmacy seminar." Course fee £35. March 9, at 10am. Mr M. Batson on "Truss fitting." Course fee £46. March 23-24, at 9.45am. Mr N. Rout on "Profit through people — an introduction to basic management skills." Course fee £92 (exc accommodation). Details for all courses from Training Department, Mallinson House, St Peter's Street, St Albans.

South Western Regional Health Authority, Courses for pharmacists, Lyngford House, Taunton. January 20-21, Hypertension and its treatment. January 31, Antiarrhythmics. February 1-2, Lecturing techniques. February 24-25, Pharmacy managers conference. March 15-16, Clinical problems of the immune response. Details from Regional Pharmaceutical Officer's Education Department, 27 Tyndalls Park Road, Bristol BS8 8PJ, telephone (0272) 738471.

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MARKET NEWS

Peppermint oil prices soar

London, January 11: Because the new-crop mint cutting which normally takes place in November-December has been prevented by heavy rains in the growing areas of Brazil and Paraguay, shippers of peppermint oil from Brazil have raised their prices by £1.50/kg since the holidays, and some shippers have withdrawn even at the advanced rates. Considerable business was nevertheless transacted on the London market in the past week which also saw renewed interest in, and higher prices for, petitgrain which originates from the same area.

Chinese peppermint was also dearer on the spot but that was not caused by any change at origin while menthol, although dearer, did not reflect the same size of increase because of existing stocks. Brazilian bois-de-rose was also sharply up on the spot. Among Chinese oils cedarwood, citronella and eucalyptus were marginally up.

Some spices were easier, but in botanical drugs scarcities of those items which have been prevalent of late combined with higher prices. Russian liquorice root is particularly difficult to locate.

Among pharmaceutical chemicals prices of many vitamins have changed to compensate for the weaker pound against some European currencies, notably the Swiss franc and West German DM

Pharmaceutical chemicals

Acetarsol: £27/kg in 50-kg lots.
Acetic acid: 4-ton lots, per metric ton delivered — glacial BPC £398, 99.5 per cent £381, 80 per cent grade pure £345; technical £324.
Acetone: £480 metric ton for 30-drum lots.
Adrenaline: 1 kg lots, base £0.40 per g; acid tartrate £0.35 per g.
Aluminium hydroxide: BP dried gel £1.70/kg in 200 kg lots.
Ammonium acetate: BPC 1949 crystals £1.11/kg in 50-kg lots.
Ammonium bicarbonate: BPC £234.77 metric ton, ex-works, in 50-kg bags.
Ammonium tartrate: Commercial £3.51/kg in 50-kg lots.
Amylobarbitone: Less than 100 kg £24.30/kg; sodium £26.60.
Ascorbic acid: (per kg) 25-kg £6.27; 500-kg £5.50-£5.87 as to source; coated £6.25 — (25-kg lots).
Aspirin: Ten-ton lots £2.20/kg; imported from £1.90.
Atropine: (per kg in 1/2-kg lots) Alkaloid £220; methonitrate £205; sulphate £193.
Benzoic acid: BP in 50-kg lots, £7.50/kg.
Benzoic acid: BP in 500-kg lots, £0.8801/kg.
Biotin: Crystals £5.51 per g; in 10-g lots.
Bismuth salts: £ per kg.

| | | |
|--------------|-------|--------|
| | 50-kg | 250-kg |
| salicylate | 12.47 | £12.15 |
| subcarbonate | 7.55 | 7.44 |
| subnitrate | 5.64 | 5.55 |

Borax: EP grade, 2-4 ton lots per metric ton in paper bags, delivered — granular £346, powder £376, extra fine powder £393.
Boric acid: EP grade per metric ton in 2-4 ton lots — granular £507, powder £540.
Bromides: Ammonium potassium, sodium per metric ton in 50-kg lots £1,000; 250-kg lots £975; 1,000-kg £950.
Brucine sulphate: £45/kg.
Butobarbitone: Less than 100 kg £28.90 per kg.
Caffeine: BP anhydrous £4.20/kg for 250-kg minimum.
Calamine: BP £796 per 1,000-kg delivered.
Calcium ascorbate: £7.38/kg in 25-kg pack.
Calcium carbonate: Precipitated BP £285 metric ton delivered UK.
Calcium chloride: BP powder anhydrous 96/98% £1.52/kg in 50-kg lots; hexahydrate crystals BP 1968 £1.19.
Calcium gluconate: £2.105 per metric ton.
Calcium lactate: 100-kg lots £1.37/kg.
Calcium pantothenate: £8.25/kg in 25-kg lots.

Carbazochrome: technical £65/kg; sodium sulphate £113/kg.
Carbon tetrachloride: BP 5-ton lots in 290-kg drums £305 per metric ton.
Carotene: Beta — 10% £34.10/kg (5-kg lots); 20% suspension £43.45/kg (5-kg).
Chloral hydrate: 50-kg lots £2.85/kg.
Chloramphenicol: *levo* BP £80.20/kg in 500-kg lots.
Chloroform: BP in 180-litre drum from £1.24 per litre for one drum lots down to £0.99 for 39 drums. In 2-litre bottle £3.20 each for 175 litres; £2.50 for 7,000 litres.
Chloroquine phosphate: In 250-kg lots, £15.80/kg.
Choline: (50-kg lots) dihydrogen citrate £3.40/kg; chloride pure £4.95.
Cinchocaine: (5-kg lots) base and hydrochloride £125/kg.
Citric acid: BP per metric ton single deliveries, granular monohydrate £892; anhydrous £941 (powdered £25 premium per 1,000 kg).
Clioquinol: BP 80 500-kg lots £23.25/kg.
Cocaine: Alkaloid £1,076/kg; hydrochloride £947.70.
Cyanocobalamin: per g £3.85 in 100-kg lots; imported £3.25 in 1-kg lots.
Cyclobarbitone: Calcium in 50-kg lots £31.25/kg.
Dapsone: BP in 200-kg lots, £12.50/kg.
Dexpanthenol: (per kg) £10.89 in 5-kg lots.
Dextromethorphan: £177.10 in 5-kg lots.
Diazepam: In 50-kg lots, £20/kg.
Dihydrocodeine bitartrate: £535/kg in 20-kg lots, Subject to Misuse of Drugs Regulations.
Ephedrine: (Per kg), hydrochloride £14 in 250-kg lots.
Ergometrine maleate: £6.36 in 50-kg lots.
Ergotamine tartrate: £4.25 in 50-kg lots.
Ether: BP anaesthetic 2-litre bottle £4.42 each for lots of 175 bottles; in 130-kg drum £2,000 metric ton. BP solvent in 130-kg drum £1,440 metric ton.
Ethisterone: £250 per kg.
Ferric citrate: £5/kg in minimum 250-kg lots.
Ferrous fumarate: BP £1.40/kg in 750-kg lots minimum.
Ferrous gluconate: £2,495 per metric ton.
Ferrous sulphate: Dry £590 metric ton.
Folic acid: £71.50/kg as to quantity £65/kg.
Formic acid: per metric ton delivered in 4-ton lots, 98 per cent £400; 85 per cent £334.
Glucose: (Per metric ton in 10-ton lots) — monohydrate £335; liquid 43° Baumé £351.50 (5-ton lots); naked 18-ton lots £290.25.
Glycerin: in 250-kg returnable drums £810 metric ton in 5-ton lots; £835 in 3-ton lots.
Homatropine: Hydrobromide £145/kg; methylbromide, £138 — both in 1/2-kg lots.
Hydrogen peroxide: 35 per cent £348 metric ton.
Hydroquinone: 50-kg lots £3.08/kg.
Hypophosphorous acid: (Per metric ton in 50-kg lots). Pure 50% £4,547.50.
Iodides: (Per kg) Ammonium £14.50 (50-kg lots), potassium £9.35 (250 kg); sodium £12.35 (50 kg).
Iodine: Resublimed £11.10/kg in 250-kg lots; crude 99.5% £8.50 in 500-kg lots.
Iodoform: USNF £17/kg in 50-kg lots.
Isoetharine hydrochloride: £184/kg for 1-kg lots.
Isoniazid: BP 1973 £4.80/kg in 200-kg lots.
Isonalene: Hydrochloride £80/kg; sulphate £75 for 1-kg lots.
Kaolin: BP natural £199.30 per 1,000 kg; light £208.10 ex-works in minimum 10-ton lots.
Lactic acid: BP 88/90% £1.80/kg in 70-kg drum.
Lobeline: Hydrochloride £1.49 gram; sulphate £1.92 in 100-g lots.
Magnesium carbonate: BP per metric ton — heavy £800; light £600-£645 as to maker.
Magnesium chloride: BP crystals £1.21/kg for 50-kg lots.
Magnesium dihydrogen phosphate: Pure £2.45/kg in 50-kg lots.
Magnesium hydroxide: (metric ton) £1,650; 28 per cent paste £550.
Magnesium oxide: BP per metric ton, heavy £1,700; light £1,600.
Magnesium sulphate: BP £147.10-£150 metric ton; commercial from £130; exsiccated £310.60.
Magnesium trisilicate: Light £0.80/kg; heavy £0.79/kg in minimum 900-kg and 1,200-kg lots respectively.
Mercurials: Per kg in 50-kg lots; ammoniated £15.20; oxide — red £16.30; and yellow £16.05; perchloride £8.85; subchloride £12.10; iodide £15.
Mersalyl: Acid £86.16/kg in 10-kg lots; £82.06/kg in 24-kg lots.
Methadone hydrochloride: £330 per kg. Subject to Misuse of Drugs Regulations.
Methyl salicylate: 5-ton £1.73/kg; 1-ton £1.78.
Metol: Photo grade per kg. 50-kg lots £9.90.
Nicotinamide: £4.82/kg in 50-kg lots.
Nicotinic acid: £4.54/kg in 50-kg lots.
Opiates: (Per kg) in 1-kg lots; subject to Misuse of Drugs Regulations — Codeine alkaloid £600-£604 as to maker; hydrochloride £520; phosphate £460.50-£462; sulphate £520.
Diamorphine alkaloid £821; hydrochloride £748.
Ethylmorphine hydrochloride £585.50-£591.
Morphine alkaloid £667-£668; hydrochloride and sulphate £544-£545.
Oxalic acid: Recrystallised £1.83/kg for 50-kg lots.
Papaveretum: £390/kg; 5-kg lots £355/kg. Subject to Misuse of Drugs Regulations.
Paracetamol: (Per kg) 10-ton contracts from £2.75 to £3.10; 1-ton £3.15. Premium for d/c £0.45/kg.
Paraffin liquid: BP WOM 65 per litre in 210-litre drums £0.767 litre; light liquid BPC 1963, £0.694. Technical white oil WOT 14, £0.682; WOT 24, £0.711.
Pentobarbitone: Less than 100-kg £32.55/kg; sodium £34.40.
Pethidine hydrochloride: 10-kg lots £73.40/kg. Subject to Misuse of Drugs Regulations.
Petroleum jelly: BP soft white grade 54 £576 metric ton; grade 56 £535 delivered UK in 170-kg drums; yellow BP in grade 60 £576 in 174-kg drums.
Phenylephrine hydrochloride: £97/kg in 25-kg lots.
Phosphoric acid: BP s/g 1,750 £0.5773/kg in 38-drum lots minimum.
Pholcodine: 1-kg £538; £493/kg in 60-kg lots. Subject to Misuse of Drugs Regulations.
Phthalylsulphathiazole: 50-kg lots £4.66/kg.
Phthalylsulphathiazole: 50-kg lots £4.66/kg.
Physostigmine: Salicylate £3.70 per g; sulphate £4.49 in 100-g lots.
Pilocarpine: Hydrochloride £532.43/kg; nitrate £527.03.
Potassium ammonium tartrate: £2.76/kg in 50-kg lots.
Potassium bitartrate: £1,050 per metric ton.
Potassium citrate: Granular £1,071 per metric ton. 5-ton contracts £1,063 ton.
Potassium diposphite: in 50-kg lots; powder £1,165 metric ton ex works, minimum 3-ton lots.

Potassium hydroxide: Pellets BP 1963 in 50-kg lots £2,436.10 metric ton; technical flakes £766 ex works.
Potassium nitrate: Recrystallised £1.72 for 50-kg drums.
Potassium phosphate: monobasic BPC 1949. £1.79/kg in 50-kg lots.
Pyridoxine: £22.61/kg for 20-kg lots.
Quinalbarbitone: Sodium in 50-kg lots £35.85/kg.
Reserpin: Alkaloid £0.55 gram in 100-g lots.
Riboflavin: (Per kg) £25.91 in 10-kg pack, 100-kg phosphate sodium £81.40 in 5-kg.
Saccharin: BP sodium, powder £3.40/kg; crystals £3.20, both for 250-kg lots.
Salicylic acid: 5-ton lot £1.75/kg; 1-ton £1.79.
Sodium acetate: BP crystals £0.90/kg in 50-kg.
Sodium acid phosphate: BP crystals £1.24-£1.49/kg as to source for 50-kg lots.
Sodium ascorbate: 25-kg lots £6.27 per kg.
Sodium benzoate: £0.70/kg in 500-kg lots.
Sodium bicarbonate: BP from £168.40 metric ton as to grade in minimum 10-ton lots delivered UK.
Sodium chloride: Vacuum dried in 10-ton lots delivered London 4-ply bags £52.55 metric ton.
Sodium citrate: Granular £893 metric ton; powder £918. Five-ton contracts granular £886, powder £911 — all in lined bags.
Sodium fluoride: in 50-kg lots £2.43/kg ex works.
Sodium gluconate: Technical £825 metric ton.
Sodium hydroxide: Pellets BP 1973 in 50-kg lots £0.91-£1.90/kg ex works.
Sodium nitrate: BPC Recrystallised £1.44/kg for 50-kg lots.
Sodium nitrite: BPC 1973 £1.51 for 50-kg.
Sodium perborate: (per 1,000 kg) monohydrate £723; tetrahydrate £430.
Sodium percarbonate: £567 per metric ton.
Sodium sulphate: Fine crystals BP £109 per metric ton, pea crystals £131.20; commercial £43.10 ex works.
Sodium sulphite: Crystals £0.216/kg (500 kg minimum).
Sodium thiosulphate: photo grade £282 per metric ton; £264.50 ton in 4-ton lots.
Sorbitol: Powder £890 metric ton; syrup £430-£450 as to grade.
Stibocinol: BP in 25-kg lots, £197.50/kg.
Strychnine: Alkaloid £74.30 per kg; sulphate and hydrochloride £60.40/kg 5-10 kg lots.
Succinic acid: In 500-kg lots, £1.40/kg.
Succinylsulphathiazole: £9.98/kg in 50-kg lots; imported £5.50 (250-kg).
Sulphacetamide sodium: BP £7.20/kg for 50-kg.
Sulphadiazine: BP £68.44.80/kg in 250-kg lots.
Sulphadimidine: £4.60/kg for imported in 1/2-ton lots.
Sulphamethizole: £15.84/kg in 250-kg lots.
Sulphanilamide: BPC £68.22.20/kg in 250-kg lots.
Sulphaquinoxaline: BP Vet £16.05/kg; sodium salt £20.63 in 500-kg lots.
Sulphathiazole: BP 1973, £4/kg in 1/2-ton lots.
Talc: BPC sterilised £750 metric ton in 50-kg; £465 for 1,000-kg lots.
Tartaric acid: £1,795 per metric ton.
Tetracycline: Hydrochloride £13.50/kg in 250-500 kg lots.
Theobromine: Alkaloid, limited quantities about £25/kg.
Theophylline: Anhydrous and hydrous £5.63/kg in 100-kg lots — ethylene diamine £6.08/kg.
Thiamine: Hydrochloride / mononitrate £19.86/kg in 20-kg lots of British origin.
Tocopherol: DL alpha 5/kg £18.92/kg.
Tocopheryl acetate: DL-alpha per kg £15.40 (in 20-kg lots); adsorbate £13.75 (25-kg); spray-dried £11.83.
Vitamin A: (per kg) acetate powder 1/2 miu per g £19.58 (5 kg lots); palmitate oil concentrate 1 miu per g £17.27 (5-kg); water miscible £5.45 litre (6-litre pack).
Vitamin D2: Type 850 £56.00; type 80 £5.94/kg (25-kg lots).
Vitamin K1: £1.21/g for 100g packs.
Yohimbine hydrochloride: £477 per kg; £400/kg in 5-kg lots.
Zinc acetate: Pure £1.63/kg in 50-kg lots.
Zinc carbonate: Pharmaceutical grade £756 per metric ton.
Zinc chloride: Anhydrous powder £450 metric ton, delivered U.K.

Crude drugs

Aloes: Cape £1,500 metric ton, cif. Curacao no spot or cif.
Balsams: (kg) Canada: spot; £23.30/kg, cif. **Copaiba:** Spot £4.35; £4.60, cif. **Peru:** £9.40 spot; £10.05, cif. **Tolu:** Spot £5.30.
Belladonna: herb £5.35/kg spot; £15.05, cif; leaves £1.14/kg; £1.80, cif; root no spot; £2.34/kg cif.
Benzoine: £148 cwt, cif.
Cardamoms: AGN £8/kg, cif.
Cherry bark: No spot; £1,770 metric ton, cif.
Chillies: Unquoted, powder £1,000 per metric ton spot.
Ginger: Cochín £1,200 metric ton spot and cif. Jamaica No. 3 £1,950, cif. Nigerian split unquoted £700 spot; Indonesian £600 spot.
Liquorice: Root, £700, cif. Block juice £1,400 metric ton spot; spray-dried powder £1,900.
Lobelia: unquoted.
Menthol: (kg) Brazilian £7.50 spot; £7.25, cif. Chinese £7.25 spot; £7.00, cif.
Pepper: (metric ton) Sarawak black £1,000 spot, £1,500, cif; white £1,300 spot, £1,900, cif.
Sarsaparilla: £3,450 metric ton, cif.
Seeds: (metric ton, cif). **Anise:** China star £2,250. **Celery:** Indian £800. **Coriander:** Moroccan £500. **Cumin:** Indian £1,250. **Fennel:** Indian £1,900. **Fenugreek:** Turkish £285; Indian £275.
Turmeric: Madras finger £500 metric ton spot; £500, and cif. **Valerian:** European unquoted, Indian, no spot; £2,420, cif.

Essential and expressed oils

Bois de rose: £111.50/kg spot; £10, cif.
Cedarwood: Chinese £4.60/kg spot cif.
Citronella: Ceylon £2.10/kg spot; £2.05, cif. Chinese £3.00 spot; £3.00, cif.
Eucalyptus: Chinese £3.00/kg spot; £3.00, cif.
Patchouli: Indonesia £25.50/kg spot; £2, cif.
Peppermint: (kg) Arvensis — Brazilian £9.00 spot, £8, cif. Chinese £4 spot and cif. American piperrata £13.50.
Petitgrain: Paraguay £8.00/kg spot, cif.
Sandalwood: Mysore £68/kg spot. East India £65/kg spot.

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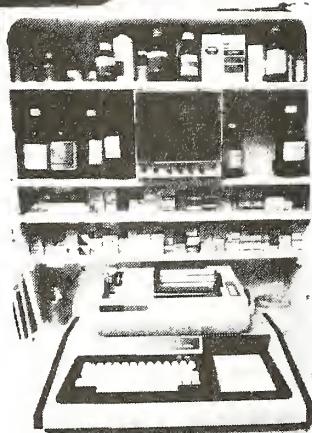
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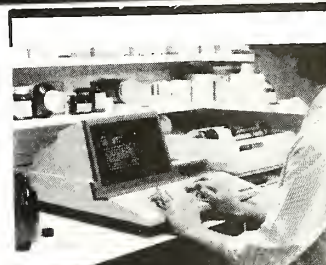
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